

REASONABLE ACCOMMODATION REQUEST FORM

The Oklahoma Department of Transportation (ODOT) ensures that no person or groups of persons shall, on the grounds of race, color, sex, religion, national origin, age, disability, retaliation or genetic information, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any and all programs, services, or activities administered by ODOT, its recipients, sub-recipients, and contractors. To request an accommodation please contact the ADA Coordinator at 405-521-4140 or the Oklahoma Relay Service at 1-800-722-0353. If you have any ADA or Title VI questions email ODOT-ada-titlevi@odot.org.

Date of Filing: _____
Name: _____
Address: _____
City, State, Zip Code: _____
Work Phone: _____
Home Phone: _____
Email Address: _____
Date of Alleged Incident: _____



Oklahoma Department of Transportation
Contract Compliance Division
200 N.E. 21st Street, Room 1-C1
Oklahoma City, OK. 73105-3204
Office: 405-521-4140
Fax: 405-522-2136
Email: ODOT-ada-titlevi@odot.org

Type(s) of Disability/Disabilities:

- Speech Hearing Visual
 Mobility Mental / Emotional Other: _____

1. Nature and/or cause of disability/disabilities:

2. What specific accommodation are you requesting? If known, please identify the source and cost for providing the accommodation(s).

3. If you are not sure of the accommodation needed, do you have any suggestions about what options we can explore?

4. What limitations are interfering with your ability to perform your job or access an employment benefit?

5. How do these limitations affect you and/or your job performance?

6. What specific job tasks are problematic as a result of these limitations?

7. If you are requesting a specific accommodation, how will that accommodation assist you?

Please attach and/or provide any additional information that might be useful in processing your accommodation request.

The completed form must be submitted to the Oklahoma Department of Transportation's Contract Compliance Division. If you require any assistance in filling out this form, please contact the ADA/504/508 Coordinator at 405-521-4140.

Signature

Date