



ADA Request For Reasonable Accommodation

1. Case No: _____ Date: _____

Case Name: _____

2. Name of Person Requesting: _____

Address: _____ Phone No.: _____

(Mailing Address)

(Area Code, Phone Number)

Email: _____

(City, State, Zip Code)

3. I am participating in a court proceeding/activity as a (check all that apply):

- | | | | | | |
|--------------------------|---|--------------------------|----------------------|--------------------------|------------------|
| <input type="checkbox"/> | Petitioner/Plaintiff | <input type="checkbox"/> | Defendant/Respondent | <input type="checkbox"/> | Attorney |
| <input type="checkbox"/> | Witness | <input type="checkbox"/> | Juror | <input type="checkbox"/> | Judicial Officer |
| <input type="checkbox"/> | Other (Specify interest in or connection to proceeding, if any) | | | | |

What is the disability that limits one or more of your major life activities (e.g., walking, hearing, speaking, seeing, reading or writing)?

Will this disability require special accommodations in order for you to conduct your business in the court?

- Yes No

If yes, please describe below the special accommodations needed and include written documentation supporting the accommodation that you are requesting.

Your disability must be one that is covered under the ADA. Please provide supporting medical documentation. Medical documentation must comply with the following:

- 1) Be on official letterhead from a licensed or certified health professional appropriate for diagnosing and treating the disability;
- 2) Make a recommendation for the specific accommodations with current detailed documentation supporting the request;
- 3) Be dated within the last three years.

4. List all known dates/times the accommodation(s) are needed (specify):

5. Why is an accommodation needed?

6. What accommodation would you like? And why?

7. Please provide any information that would help the court respond to your request.

8. How do you want to be informed of the status of your request for accommodation?

Phone Writing Email In Person Other(specify):

I declare under penalty of perjury under the laws of the state of Arizona that the foregoing is true and correct.

Date: _____ at _____ (City, State)

(Type or Print Name of Person Requesting)

(Signature of Person Requesting)