

Office of Residential Life 4525 Downs Drive Saint Joseph MO, 64507 reslife@missouriwestern.edu (816) 383-7100 Fax - (816) 383-7106

The student will complete this form and provide it to the Office of Residential Life. The Office of Residential Life will forward the request to the Accessibility Resource Center for appropriate follow up and documentation. All information provided is kept confidential under applicable laws and will only be shared with the necessary professionals to fully evaluate the request.

REQUEST FOR REASONABLE HOUSING ACCOMMODATIONS

PLEASE NOTE: This process and all related disability documentation are specific to <u>housing accommodation</u> <u>requests</u> only. To request academic accommodations, you must contact the Accessibility Resource Center. Please visit the website at https://www.missouriwestern.edu/arc/ or e-mail mritter@missouriwestern.edu for more information.

Name:	G#:
Phone:	_
Student E-Mail	_
Semester/Year for which accommodation is requested:	
Current MWSU housing assignment (Hall/Room):	
Please indicate Class Year: Freshman Sophomore Junior_	Senior Grad
Have you previously applied for housing accommodations at MWSU?	YES NO
If yes, when?	_

If yes, please list any accommodations that you received: I am requesting the following housing accommodations: (Requested accommodation must be clearly linked to functional limitations. A specific building or roommate request is not considered a reasonable accommodation and will not be evaluated as such).

- Wheelchair Accessible Unit (please specify modifications you needed)
- o Furniture Removal
- Access/Key for Caregiver
- Private Bathroom
- Vibrating Fire Alarm
- Service Animal
- Mealplan Waiver
- Flashing Doorbell
- Flashing Fire Alarm
- o Other

Description of request:

Do you require evacuation assistance? Yes____ No____

If yes, please describe your needs for evacuation assistance:

Please sign below, indicating that all information provided is accurate to the best of your knowledge