

University Housing Accommodation Request Form

TO BE COMPLETED BY HEALTH CARE PROVIDER

DEADLINES AND ROOM PLACEMENT EXPECTATIONS

Deadlines for submitting housing accommodation requests:

- Returning Students for the following academic year: February 25th
- First-Time First-Year Students and Transfer Students for the upcoming academic year: June 1st

Campus housing is a limited resource. Student Accessibility Services (SAS) cannot guarantee availability of a room that meets a specific accommodation. If a student is determined eligible for housing accommodations, they will be placed on a prioritized waitlist that is dependent on University Housing availability. Once the deadlines (listed above) pass, housing options decrease significantly. University Housing will prioritize these requests over other non-disability related housing requests, but students submitting late requests may find that their housing accommodation is not available in a timely manner.

Housing accommodations are not provided as a tool for addressing roommate issues nor preferences for certain locations or learning communities.

REQUEST FORM COMPLETION AND REVIEW:

A qualified professional not related to the student may complete this form to support a student's request for housing accommodations at UVM. This information will be used in conjunction with the student's self-report and SAS staff members' structured interview to determine reasonable accommodations on an individual basis.

While this documentation may be sufficient in establishing the presence of a disability, recommendations on this form do not automatically bind SAS to determine the student eligible for specific accommodations. A provider's recommendations are taken into consideration as part of a full review that includes a multitude of factors.

Once this completed form is received, the ADA Housing Committee will review this request to determine eligibility. The review process can take up to 14 business days.

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Student's name:	Date of birth:	
Date of initial contact with student:		
Date of most recent interaction with student:		
Frequency or number of contacts since initial appointment: _		
Relevant Diagnosis	DSM-5 or ICD-10 Code	Date of Diagnosis
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Describe the evaluation(s) used to make the diagnoses. If ava	illable, provide a diagnostic	report of the assessment.
List current, relevant symptoms and functional limitations th		

What is the expected duration of this condition?
Describe any situations or environmental conditions that may exacerbate the condition.
What housing accommodations do you recommend for equitable access? Include your rationale relevant to this
student's functional limitations.
Describe the health impact if the recommended housing accommodations are not met.
Describe the health impact if the recommended housing accommodations are not met.
List relevant medications currently prescribed. Include the dosage, side effects, and effectiveness of each.
Describe the student's compliance with treatment interventions.
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Name and credentials of provider:		
License number and state:		
Associated organization:		
Address:		
Phone number:		
Signature:	Date:	

Submit this completed form to Student Accessibility Services (SAS) in one of the following ways:

Email: access@uvm.edu Fax: 802-656-0739

Mail: Student Accessibility Services, UVM, 633 Main Street A-170 Living/Learning, Burlington, VT 05405

Uploaded directly by student: https://myaccess.uvm.edu/ClockWork/user/student/files.aspx

Questions? Call Student Accessibility Services: 802-656-7753