

# COVID-19 Reasonable Accommodation Request

Faculty and staff whose age or health condition is identified as high risk for severe illness from COVID-19 according to the CDC categories listed below may request an accommodation utilizing this form. Faculty and staff who are not in a high risk category, but would like an accommodation (to include remote teaching/work) may also utilize this form to request an accommodation.

- Age 65 years or older
- People of all ages with underlying medical conditions, including
  - Chronic lung disease or moderate to severe asthma
  - Serious heart conditions
  - Immunocompromised
  - Severe obesity (BMI of 40 or higher)
  - Diabetes
  - Chronic kidney disease undergoing dialysis
  - Liver disease
  - Other
- Other (child's school closure, living with high risk family member, etc.)

Health information provided in this request will remain confidential and will not be shared with anyone outside of Human Resources without written consent of the faculty or staff member requesting the accommodation.

The names of faculty members seeking an accommodation that would result in teaching remotely will be shared with the Registrar so their courses can be removed from classroom use upon approval of the request. No other information will be shared.

Kenni Simons, Manager of Total Rewards, will contact the faculty or staff member to discuss the request and obtain any additional information needed. If the university is unable to accommodate the request and the individual is unable to safely work, they have the choice of using any accrued leave or applying for unemployment benefits.

If the request is not a result of the faculty or staff member being in a high risk category, such as a child's school closure, the request will be forwarded to the individual's supervisor or department chair for consideration and/or approval. These requests do not fall under the governor's proclamation and do not have the same rights and protections as those that do.

**PERSONAL INFORMATION**

Name \_\_\_\_\_

Job Title \_\_\_\_\_

Department \_\_\_\_\_

Preferred Method of Contact      \_\_\_\_\_ E-Mail      \_\_\_\_\_ Phone

Preferred E-Mail \_\_\_\_\_

Preferred Phone \_\_\_\_\_

Faculty / Staff      \_\_\_\_\_ Faculty      \_\_\_\_\_ Staff

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**INFORMATION ABOUT ACCOMMODATION REQUEST**

Start Date of Request \_\_\_\_\_

Anticipated End Date of Request \_\_\_\_\_

Reason for Request

\_\_\_\_\_ Age 65 years or older

\_\_\_\_\_ Underlying health condition

\_\_\_\_\_ Other: Please explain: \_\_\_\_\_

Type of Accommodation Requested

\_\_\_\_\_ Remote Teaching/Remote Work or Alternative Work Location

\_\_\_\_\_ Social Distancing Measures

\_\_\_\_\_ Other

Additional details about requested accommodation