

Orange County Public Schools

PUBLIC ACCOMMODATION REQUEST FORM

Members of the public who need a barrier removal accommodation or modification to a program, service, or activity of Orange County Public Schools should make that request by letter, e-mail, phone call to the ADA Manager, or by using this request form.

	Name:			Date of Request:
	Phone:		E-mail:	request.
	I am a:	☐ Parent ☐ Visitor	☐ Tech Center Studen	t
	Type of Request:	☐ Modification	☐ Barrier Removal	
	School/Location:			
	Questions to clarify accommodation request.			
EMPLOYEE	1. What specific accommodation are you requesting?			
To be completed by EMPLOYEE	2. Provide a brief statement why this accommodation is necessary?			
To k	3. What date do	you need this accommodation	on implemented?	
	Signature:			Date:

Please submit the completed form to the ADA Manager in the OCPS Office of Legal Services. For information or assistance in completing the form, please contact the ADA Manager.

MICHAEL GRAF, ADA MANAGER

Orange County Public Schools Office of Legal Services 445 W. Amelia St. Orlando, FL 32801-1129

Tel: 407-317-3200 x2002923 Fax: 407-317-3348 legalservices@ocps.net