



The Seattle Public Library

Reasonable Accommodation Request Form

The Seattle Public Library ("Library") provides reasonable accommodations, by request, for physical access, communications, or other needs to ensure services, activities and programs are available to people with disabilities.* Please complete the following form regarding your reasonable accommodation request.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (day): _____ (evening): _____

Email (optional): _____

Preferred Method of Contact: _____

Library card number: _____

I am requesting the following accommodation(s): (check all that apply)

Use of assistive technology to participate in a program or service offered by the Library. This includes but is not limited to use of the Library Equal Access Program lab equipment. Please specify the assistive technology: _____

_____.

ADA Circulation Qualification status. The ADA Circulation Qualification Program serves patrons who have disabilities that are expected to last at least six months. Applicants must have a condition that makes it difficult or impossible to return Library materials within the usual checkout periods: two weeks for DVDs and three weeks for other materials.

Other. Describe the accommodation you are requesting and how it will assist you in your use of Library programs or services: (Please attach additional sheets as necessary.)

Please submit your completed form to:

Cleo Brooks, ADA coordinator
The Seattle Public Library
1000 Fourth Ave.
Seattle, WA 98104

Your request will be addressed as expeditiously as possible, but no later than 15 calendar days after receipt. Please note that certification by a health care provider may be required. If you are not satisfied with the response to your request you may appeal to the Administrative Services Director, 1000 Fourth Ave., Seattle, WA 98104, V/TTY within 15 calendar days of receiving the response.

*The Americans with Disabilities Act (“ADA”) does not require The Seattle Public Library to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

This form is for Library use only and the information will be kept confidential.