Housing Accommodation Request Form
(To be completed by student, please print or type)

Student Name: ________________________________ Student ID#: __________

Academic Term: □ Fall □ Spring □ Summer Academic Year: ______

Date you applied for housing: ___________ Date admitted to Emory: __________

Expected Duration of Accommodation: □ Permanent □ Chronic/recurring

□ Temporary – date condition started: __________

Projected end date: __________

Disability/Diagnosis that is the basis for this request: ________________________________

Describe the impact of the disability on your functioning in a residence hall setting:

__________________________________________________________________________

__________________________________________________________________________

Please state the specific accommodations you are requesting:

__________________________________________________________________________

__________________________________________________________________________

Please specify any assistive technology equipment or devices you are requesting to bring into
the residence hall, if applicable:

__________________________________________________________________________

__________________________________________________________________________
I understand that my request for housing accommodations cannot be addressed until all required documentation is received by the Office of Access, Disability Services and Resources. In general, documentation must be:

- Written by someone with credentials/expertise in a relevant area to make recommendations;
- A clear explanation of how accommodations are related to the disability.

By submitting this form, I give permission for Access, Disability Services and Resources to share pertinent information with Emory’s Department of Housing in order to facilitate my request for accommodations.

Student Signature: _____________________________  Date: ______________