Student Request for Housing Accommodations - Academic Year 2020-2021

To qualify for housing accommodation under the Americans with Disabilities Act (ADA), the student must have a current diagnosis/disability that substantially limits a major life activity, and the accommodation(s) requested must be deemed reasonable and appropriate. Housing Accommodations are provided on a case-by-case basis. The presence of a diagnosis does not automatically qualify the student for the requested accommodation(s). The Practitioner’s Verification of Diagnosis for Housing Accommodations form must indicate substantial need for the requested accommodation(s).

Student Name: ___________________________  Student ID #: ___________________________

Student E-mail: ___________________________  Date of Request: _________________________

I am a (check one):  __ returning student  __ freshman student
                   __ transfer student  __ I am applying for readmission to the University

I am requesting housing accommodations for the:
                   ___ Fall Semester ___ Spring Semester ___ Summer in the YEAR: 20____

• For your request to be considered, you must submit this form and the Practitioner’s Verification of Diagnosis For Housing Accommodations form.
• In order to process your request, both completed forms must be received by OAS. Delivery instructions can be found at the end of this form.
• If your request for housing accommodation is approved by OAS, your approval will be communicated by OAS to the Office of Residence Life.
• All housing assignments are in accordance with your class rank and are made by the Office of Residence Life based on the accommodating features OAS confirms. All placements are subject to availability.
• ESA accommodations are established by the Fair Housing Act (FHA) and not by the Americans With Disabilities Act. Therefore, ESA requests must be completed through a separate process from this Housing Accommodation request form. To make a request for an ESA accommodation, review and complete the Emotional Support Animal and Service Animal Information Packet.

Requested Housing Accommodation(s):
If requesting more than one accommodation from the list below, please rank your requests in order of necessity/priority for your equal access, as some of these items are not available in all residence halls. You must also complete the personal statement on page 2.

☐ Single Room  ☐ No Top Bunk
☐ First-floor Location  ☐ Low-Occupancy Bathroom
☐ Location without stairs  ☐ Bed-shaker
☐ Wheelchair Accessible  ☐ Illumination Strobe
☐ Housing on the Main Campus  ☐ Low-allergens environment
☐ Special Dietary Request  ☐ Air-conditioning
☐ No Carpet  ☐ Emotional Support Animal *
☐ Other ____________________
Student Statement:
*If this is a request for an ESA, do not complete the questions below; instead, you must complete the Emotional Support Animal and Service Animal Information Packet.

1. Describe how your diagnosis/disability impacts your ability to access Simmons University residential housing.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

2. Describe how the accommodation(s) requested relate to your diagnosis and how the accommodation(s) will provide access to participate in Simmons University residential housing.

_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

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Student’s Signature: ___________________________________________ Date: __________________________

Office of Accessibility Services
Center for Student Success | Simmons University
300 The Fenway
Boston, MA 02115
617-521-2658

Delivery Instructions:
This form may be submitted digitally through our secure file transfer link: https://filetransfer.simmons.edu/form/OAS
You may US mail or hand-deliver this form to the OAS at the address above.

Please send general inquiries to access@simmons.edu. Do NOT send completed forms through email.

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