



## DISABILITY HOUSING ACCOMMODATIONS REQUEST FORM

Illinois Institute of Technology is deeply committed to the full participation of students with disabilities in all aspects of university life, including residential life. With this in mind, the university has established procedures to ensure that students with disabilities have equal access to IIT's housing resources. Please refer to the *Disability Housing Accommodations Procedures & Guidelines* for the complete process for requesting disability-related housing accommodations, including deadlines. Students must follow these procedures and provide all of the required information in order to be considered for disability housing accommodations.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Semester Requesting Accommodations:

Fall

Spring

Summer

Academic Year: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Current Campus Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Current Academic Status:

First Year

Sophomore

Junior

Senior

Graduate

Other: \_\_\_\_\_

College: \_\_\_\_\_

Program/ Major: \_\_\_\_\_

Disability: \_\_\_\_\_

CDR Registration Date: \_\_\_\_\_

Have you previously applied for disability housing accommodations?  Yes  No

If yes, what semester/year: \_\_\_\_\_

If yes, please list any accommodations that you received:

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Accommodations Currently Requesting:

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In the space below, please provide a personal statement describing your condition and your need for each of the accommodations that you are requesting. You may also attach a separate document with this information.

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If you have not done so already, please attach documentation from a qualified medical or other provider in support of your requested accommodation(s.) Please refer to documentation guidelines in this handbook.

Please sign below, indicating that you have read IIT CDR *Disability Housing Accommodations Procedures and Guidelines* and have presented information accurately and to the best of your knowledge.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Send Form To:

IIT Center for Disability Resources

3424 S. State St., Room 1C3-2

Chicago, Illinois 60616

[disabilities@iit.edu](mailto:disabilities@iit.edu)

