

University of Maryland, College Park
ADA Disability Information Request Form

(To be completed by Health Care Provider)

FACULTY MEMBER NAME	
DATE OF BIRTH	

The University of Maryland College Park faculty member named above has requested that the University provide them with a reasonable accommodation under the University of Maryland's Disability & Accessibility Policy, inclusive of requirements under the Americans with Disabilities Act (ADA).

An individual with a disability is a person with a physical or mental impairment that substantially limits one or more major life activities, such as breathing, eating, sleeping, walking, talking, seeing, etc.

A faculty member making such a request must provide the University with current documentation of a disability.

You are being asked by the faculty member to provide documentation by fully completing all sections of this form. These questions will help determine:

- 1) whether the faculty member has a disability,
- 2) whether an accommodation is needed, and
- 3) what options may exist that would constitute an effective, reasonable accommodation.

Please provide any supplemental material that you feel would be helpful in considering the faculty member's request for accommodation(s).

HEALTH CARE PROVIDER INFORMATION

NAME	
SIGNATURE	
LICENSE / CREDENTIAL	
DATE	
ADDRESS	
PHONE	

ACCOMMODATION REQUEST DETAILS

1. Please identify this individual's physical or mental impairment(s).

2. Please describe the effects or limitations this impairment has on the individual's major life activities, if any.

3. Please describe whether the effects or limitations are long-term, permanent, or short-term.

4. How does the individual's limitation(s) interfere with his or her ability to perform essential duties as a faculty member?

5. Are there any activities or job functions that would present a health or safety risk to the faculty member or others due to the physical or mental impairment or its treatment?

6. Please provide suggestions for possible accommodations that will enable the faculty member to perform his or her essential job duties.

Please submit the completed form via email, in person, mail or by fax to:

Office of Faculty Affairs
1119 Main Administration Building
University of Maryland
College Park, MD 20742
Phone: 301-405-6803
Fax: 301-405-8195
Email: faculty@umd.edu