

Process Information

The University of West Florida is committed to providing equal opportunity to all of its programs, activities, and services, and in compliance with the Americans with Disabilities Act (ADA) as amended in 2008, Section 504 of the Rehabilitation Act of 1973, and the Fair Housing Act (HUD). University housing provides accessible housing for a student with a disability as defined by these laws. The student must provide documentation from a licensed, qualified professional that substantiates that the student has a physical or mental impairment that substantially limits a major life activity and that the requested accommodation is necessary to afford the student equal access. A student who requires an Assistance Animal should complete the appropriate request form that is available at www.uwf.edu/sar.

The **Request for Reasonable Accommodation in University Housing** form will be reviewed by Student Accessibility Resources staff, who will make the determination as to the validity of the request. **The student will be informed of the final determination by email within 7-10 business days after the initial submission of paperwork.**

Requesting Reasonable Accommodation in University Housing

In order to request housing accommodations, the student must have accepted a Housing and Residence Life contract. Please follow the steps below to ensure your request is properly submitted and reviewed:

1. Complete the "Request for Reasonable Accommodation in University Housing" Form

The student is responsible for completing all applicable sections of this form.

A *qualified healthcare provider* (e.g., psychiatrist, psychologist, primary care physician, or licensed clinical social worker) must complete **pages 3–4** of the form to verify the need for housing-related accommodations.

2. Submit the Online "Request Accommodations" Application

Visit uwf.edu/sar and complete the *Request Accommodations* online application.

Upload the completed *Request for Reasonable Accommodation in University Housing* form as part of your submission.

3. Monitor Your UWF Student Email for Updates

Student Accessibility Resources will notify the student by email if additional information is required or once a determination has been made.

Important Considerations

- Students must have an accepted Housing and Residence Life (HRL) Contract before submitting a Request for Reasonable Accommodation form. Requests without an active HRL Contract will not be processed.
- Requests may be submitted anytime, but to have housing preferences (area, roommate) considered, submit by these deadlines:

Summer Term: April 1**Fall Term:** May 1**Spring Term:** November 1

- Approved accommodations override any HRL Contract preferences.
- If requests come after room assignments, the University may reassign the student to a suitable space. Reassignments apply only to the student with the accommodation, not roommates.

Student Information (completed by student)

Student Name _____ UWF ID _____

UWF Student Email _____

Home Address _____ Local Address _____

Home Phone _____ Local Phone _____

Please specify the housing accommodation
you are requesting: _____

Preferred Start Date or Term: _____

REQUIRED

- ☐ I have read the Instruction page of this document, and understand that the determination will be effective immediately. If I am submitting my request **after** the deadline date, I understand that the following may occur:
1. My roommate preferences may not be considered.
 2. If room assignments have been completed, I could be moved to a room that will meet my disability need without my prospective or current roommate.
 3. If I am interested in a room change during the contracted period, I will be limited to rooms that can accommodate my disability need.
 4. I understand that once a determination is made, my room assignment will be updated immediately, and that the determination cannot be held for future semesters.

Student Signature _____

Date _____

Name _____ Student ID # _____

Student Healthcare Section (completed by healthcare provider)

Name: _____ DOB: _____

To properly evaluate how the University of West Florida can best meet the student's need for reasonable accommodations in University housing, the University requires specific diagnostic information from a licensed clinical professional or health care provider that is familiar with the history and functional limitations of the student's physical or psychological condition(s). The provider completing this form **cannot** be a relative of the student.

The provider should respond to all questions with detailed information.

Additional related information may be attached. Forms that are incomplete or illegible will not be processed.

1. Does the student who you have individually examined and treated have a physical or mental impairment that substantially limits one or more major life activities?

☐ NO

☐ YES: Describe what major life activities are impaired:

2. State the specific housing accommodation(s) that you believe this student requires:

3. Describe how the student's medical or psychological condition necessitates/warrants this accommodation request:

4. When was the last attended appointment with you? _____

5. How long have you directly treated this student for his/her condition(s)? _____

6. If the student disability requires a re-evaluation in the future to qualify for this accommodation, what is the timeframe of this accommodation?

a. Start Date: _____ End Date: _____

b. ____ No re-evaluation necessary. This is a permanent condition. ____ (Provider's Initials)

Name _____ Student ID # _____

Healthcare Provider Information (completed by healthcare provider)

☐ I am verifying that the named student information is correct, that the student is a patient that I have been treating, and that **I am not a relative of the student.**

Provider Name _____ License # _____ State _____

Provider Title _____

Address _____

City _____ State _____ Zip _____

Provider Signature _____ Date _____

Please explain your qualifications to provide a recommendation for housing accommodation for this student:

Completed Form Submission

The completed Request for Reasonable Accommodation in University Housing form, along with required documentation (if applicable), should be submitted to Student Accessibility Resources (SAR) as an attachment to the online Accommodations Request application, available at uwf.edu/sar.

Alternatively, forms may be submitted via mail, fax, or email:

By Mail:

Student Accessibility Resources
Bldg. 19/Room 100D
11000 University Parkway
Pensacola, FL 32514-5750

By Fax: 850-474-2250

By Email: sar@uwf.edu