AMERICANS WITH DISABILITIES REASONABLE ACCOMMODATION POLICY

1. Pursuant to Title II of the Americans with Disabilities Act, Legal Services of Greater Miami, Inc. will make reasonable accommodations as appropriate, reasonable and necessary in order that applicants for service and clients may participate in or receive services offered by Legal Services of Greater Miami, Inc. Reasonable accommodations will be provided at no cost to applicants for service or clients.

2. Requests for accommodations may be presented in writing or orally to:

   Deputy Director of Operations
   4343 W. Flagler Street, Suite 100
   Miami, FL 33134
   TTY: 305-573-1578
   Telephone: 305-576-0080

3. Requests for accommodations should be made as far in advance as possible, but preferably at least 7 days before the accommodation will be required.

4. Upon request, assistance will be provided, if needed, to complete a written request for an accommodation by the Human Resources Administrative Assistant.

5. If an individual has a disability that is not obvious, or it is not readily apparent how a requested accommodation relates to an individual’s impairment, it may be necessary for Legal Services to require the individual to provide documentation from a reliable third party in order for Legal Services to fully and fairly evaluate the accommodation request. These information requests will be limited to documentation that (a) establishes the existence of a disability; (b) identifies the individual’s functional limitations; and (c) describes how the requested accommodation addresses those limitations. Any cost to obtain such documentation is the obligation of the person requesting the accommodation.
LEGAL SERVICES OF GREATER MIAMI, INC.
REASONABLE ACCOMMODATION REQUEST

A disability is defined in part as a physical or mental impairment that substantially limits one or more major life activities; a record of having such an impairment or being regarded as having such an impairment. A Legal Services of Greater Miami, Inc. (Legal Services) applicant for service or client may request an accommodation that is appropriate, reasonable and necessary in order that the individual may participate in or receive services offered by Legal Services. Reasonable accommodations will be provided at no cost to applicants for service or clients.

Legal Services will work with the applicant or client to determine how to provide the reasonable accommodation requested. Legal Services may require documentation to support the reasonable accommodation request.

1. Name Of Person Requiring Accommodation:

Print First Middle Last

2. Requestor:_______________________________________________________
   If Different Than Person Requiring the Accommodation

3. Address:_________________________________________________________

4. Telephone: ________________________  5. Email: _____________________

5. Because of the person requiring an accommodation's disability, the following changes or assistance (reasonable accommodation) is necessary so that the individual can participate in the services offered by Legal Services. Check the kind of change(s) needed:

   □ Legal Services’ building or property.

   □ Assistance with, or changes, in a Legal Services’ practice, rule, policy, procedure or program service.

6. Describe the problem that the applicant/client is having, or might have, with a Legal Services’ building, property, practice, rule, procedure or program services:

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
7. Describe the type of change or assistance (reasonable accommodation) required:

________________________________________________________________
________________________________________________________________
________________________________________________________________

8. Describe how the change or assistance will help with the problem:

________________________________________________________________
________________________________________________________________
________________________________________________________________

________________________________________________________________

Signature  Date

Submit this form to:

Deputy Director of Operations
Legal Services of Greater Miami, Inc.
4343 W. Flagler Street, Suite 100
Miami, FL  33134
TTY:    305-573-1578
Telephone:   305-576-0080

For assistance completing this form contact the Human Resources Administrative Assistant at the above contact information.