

Office of Executive Inspector General

Accommodation Request Procedures for Applicants

Qualified applicants and employees with disabilities have the right to request reasonable accommodation under the law. Applicants may request accommodation for any stage of the application process, including the employment application, examination procedure or interviewing process.

Once an individual with a disability has been hired, he or she has the right to request accommodation to the work site, work schedule, or work process that would enable him or her to perform the job in question. Procedures for applicants to follow in making an accommodation request are listed below. The EEO/AA Officer and/or the ADA Coordinator can provide additional information about the accommodation process within the Office of Executive Inspector General.

Procedures:

1. Applicants may request accommodations to the application process orally or in writing (either through correspondence or the use of the accommodation request form for applicants). If the request is made orally or through written correspondence, the agency EEO/AA Officer and/or the ADA Coordinator will complete accommodation request forms in the matter for purposes of processing and documenting the request.
2. Applicants shall submit accommodation requests to the Human Resources Manager. The Human Resources Manager (if different) should provide the form to the EEO/AA Officer, the ADA Coordinator, and the General Counsel. In cases where the EEO/AA Officer and/or the ADA Coordinator completes the form for the applicant with a disability, the EEO/AA Officer and/or the ADA Coordinator shall submit completed forms to the Human Resources Manager and retain the original for him or herself.
3. A response to the request will be provided to the applicant within five days following receipt of the request by the Human Resources Manager.
4. If it is within the bounds of the authority of the Human Resources Manager to grant the request and he or she believes it to be reasonable, the accommodation will be provided. Information regarding the type of accommodation provided will be sent to the EEO/AA Officer and/or the ADA Coordinator (if different).
5. If another official within the agency must be consulted in order for the accommodation to be provided, he or she will determine whether the agency will grant the request.
6. If the agency denies the request, the applicant has the right to file an internal complaint with the EEO/AA Officer and/or the ADA Coordinator and/or external complaint with the Illinois Department of Human Rights within 300 days of the denial. An applicant may also have the right to file a complaint with the U. S. Equal Employment Opportunity Commission (EEOC) within 300 days or any other appropriate government agency pursuant to its time frame.

**Office of Executive Inspector General
Reasonable Accommodation Request for Applicants**

Pursuant to the requirements of state and federal laws, a qualified individual with a disability has the right to request reasonable accommodation in conjunction with his or her employment. Reasonable accommodation means a modification to application procedure, access to the work site, and adjustments to the work process or work schedule that would enable a person with a disability to perform a particular job. Employers are not required to provide accommodations that would impose undue hardship on the operations of their programs. The procedures for accommodation request are attached to this form. Completed accommodation request forms should be submitted to the Director of Human Resources. The agency EEO/AA Officer and/or the ADA Coordinator can respond to questions about the accommodation process.

Name:	Interviewing Agency:
Home Address:	
Telephone:	Functional Limitations

Type of Accommodation Needed

- Sign Language Interpreter for the Employment Interview
- Reader Service
- Accessible Interviewing Site
- Re-formatting of Examinations for Applicants with Learning Disabilities
- Examination Markers for Applicants with Limited Manual Dexterity
- Other (indicate type of accommodation needed) _____

Narrative Explanation

Describe how your functional limitation interferes with a portion of the pre-employment process, e.g., applying, testing or interviewing. Explain how the requested accommodation would be used to enable you to complete the application process. (Use additional sheet if necessary).

Applicant's Signature:	Date:
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Agency Action

Director of Human Resources Determination Grant Deny
 Remarks (If denied, provide explanation) _____

Final Agency Approval

Signature:	Date:
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