

**State University of New York College at Geneseo**  
**Prospective Employee, Faculty, and Staff**  
**REQUEST FOR REASONABLE ACCOMMODATION**

Application may be made to your supervisor or to the College's Affirmative Action Officer. **All** information pertaining to your request for a reasonable accommodation will be maintained separate from personnel records and may only be used in connection with accommodation efforts.

**Section A**  
**Personal Information**  
(to be completed by applicant)

Name \_\_\_\_\_ Work Telephone \_\_\_\_\_  
Department \_\_\_\_\_ Work Location \_\_\_\_\_  
Title \_\_\_\_\_

**Section B**  
**Application for Reasonable Accommodation**

(to be completed by applicant and returned to your supervisor or the College's Affirmative Action Officer within two business days)

I am requesting the following reasonable accommodation(s): \_\_\_\_\_  
\_\_\_\_\_

It is necessary for me to have this accommodation for the following reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Employee)

**Section C**  
**Supervisor's Response to Request for an Accommodation**  
(to be completed by supervisor with copy provided to the applicant)

Approved  
Comments \_\_\_\_\_  
\_\_\_\_\_

No decision has been made at this time. We will continue to assess your request. The College's Affirmative Action Officer will contact you within the next five business days.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Supervisor)

If the supervisor approves the accommodation, the form is sent to the College's Affirmative Action Officer for recording and filing. In most instances, if the accommodation is not approved at the supervisory level, additional information will be needed in order to complete the assessment process. The College's Affirmative Action Officer will conduct a comprehensive review of the request. This may include asking for medical and other documentation, meeting with the employee and/or supervisor, arranging for a job analysis, consulting with other State agencies or community based organizations providing services to persons with disabilities, etc. and assessing the request by the campus review committee.

**Section D**

**Notification of Need for Additional Information**

(to be completed by the College’s Affirmative Action Officer and returned to applicant)

Your supervisor has forwarded your application for a reasonable accommodation to the Affirmative Action Office. We are continuing to assess your request. To make a determination, we need the following information:

*Medical Documentation*

Please inform your doctor of your application for an accommodation and have your doctor provide us medical documentation, including the limitations placed on your life functions and activities. Information should be sent within two weeks to: Affirmative Action Officer, SUNY Geneseo, 219 Erwin, 1 College Circle, Geneseo, NY 14454.

*Other* \_\_\_\_\_  
\_\_\_\_\_

*We require no additional information from you at this time.*

The College review process will evaluate all relevant information. This may include an interview with you and/or your supervisor. After completion of the review, you will be informed in writing regarding the College’s decision. We anticipate that the decision will be within 15 business days. If you have any questions, please call me at 585/245-5616.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Affirmative Action Officer)

**Section E**

**Notification that Agency will Provide Reasonable Accommodation**

(to be completed by the Affirmative Action Officer and returned to applicant)

We are pleased to inform you that based on additional information provided, SUNY Geneseo is able to provide you the reasonable accommodation which you requested on \_\_\_\_\_. Please discuss this with your supervisor. If you have any questions, please call me at 585/245-5616. A letter confirming this decision will be sent to you within the next five business days.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Affirmative Action Officer)

**Section F**

**Notification of Denial of Request for Accommodation**

(to be completed by the Affirmative Action Officer and returned to the applicant)

We regret to inform you that SUNY Geneseo has denied your request for the accommodation which you made on \_\_\_\_\_. We are denying the request for the following reason(s): \_\_\_\_\_  
(Date)

\_\_\_\_\_  
\_\_\_\_\_

A letter from the President confirming the decision will be sent to you within the next five business days.

You now have several options:

1. You may choose to accept the College's decision and end the process.
2. You may choose to use the external review process and ask the Compliance Review Board for a review (the Compliance Review Board is an *advisory body* and is made up of the Governor's Executive Committee for Affirmative Action. The President of the Civil Service Commission is the Chairperson of the Committee). After reviewing your request, the Board will notify the College. They will either concur with the initial decision or ask the College to reconsider its decision. *The President, however, will make the final decision.*

The external review process takes approximately 15 business days after your request is sent to the Department of Civil Service. Within 10 business days after the College receives the Compliance Review Board opinion, the President will inform you in writing of his or her final determination and will send you a copy of the Board's recommendation.

If the College continues to deny your request *after the external review process has been completed*, you may then file a discrimination complaint if you feel that the denial was based on discrimination.

**-or-**

You may choose to file a discrimination complaint *now* if you feel that the College's denial is based on discrimination. This process takes 60 business days to complete. *If you choose this option at this time, you cannot use the external review process.*

3. In addition to the options stated above, other alternatives may also be available. This includes but are not limited to filing a complaint with any compliance agency designated under Section 503/504 of the Rehabilitation Act of 1973, filing a complaint under the New York State Human Rights Law and/or initiating a private right of action to challenge an alleged discriminatory act. For further information on these options, call the Office of Advocate for the Disabled at (800) 522-4369 (voice and TTY/TDD), (518) 473-4231 (TTY/TDD).

You may file any one or all of these complaints at any point after the first College denial of your request for an accommodation. *You may also simultaneously avail yourself of the external review process.*

### **Section G** **Authorization for External Review by Compliance Review Board**

If you wish to use the external review process, please complete the information below and return it to the Affirmative Action Office within five business days.

*All information received by the Department of Civil Service and the Governor's Executive Committee for Affirmative Action pertaining to your request for a reasonable accommodation is kept confidential.*

I authorize SUNY Geneseo to release all information pertaining to my request for an accommodation to the Department of Civil Service. This information will be used by the Governor's Executive Committee for Affirmative Action to assess my request for an accommodation.

Signature \_\_\_\_\_  
(Employee)

Date \_\_\_\_\_

(Affirmative Action Officer returns the original of this form within 5 business days to the Reasonable Accommodations Unit – New York State Department of Civil Service.)