

# REQUEST FOR SPECIAL HOUSING ACCOMMODATION

There are limited housing spaces available for accommodations and priority will be given to individuals who are eligible to receive accommodations under Section 504 or the Americans with Disabilities Act (ADA). Under the ADA, individuals must document the impact of their disability on major life activities. For example, individuals experiencing vision, physical and hearing impairment, neurological impairments, chronic life threatening systemic disabilities such as cancer, HIV, or Epstein Barr and/or traumatic brain injuries are eligible for academic and physical accommodations. All disabilities and medical history pertaining to the disability must be documented by a licensed and board certified medical provider with competence and expertise in the area of diagnosis.

Special housing accommodations are not standard academic accommodations. In order to determine if special housing is a reasonable accommodation, we must receive detailed documentation of the correlations of your academic and cognitive deficits with the need for special housing that either cannot be secured through the Room Draw process or completed after a room has been drawn.

In order to ensure the provision of reasonable and appropriate accommodations and services, current and comprehensive documentation is required. It should be submitted with professional letterhead and the qualifications of the examiner provided. A decision on housing accommodations can not be made without proper documentation. Official documentation should come from an outside person. The Wellness Center staff can provide support or can answer questions, but rarely can provide enough documentation to support an accommodation

In order for your documentation to be as complete as possible, the following questions should be answered:

- What is the problem/diagnosis?
- What is the history? How long has this been going on?
- How long will it continue?
- How does the problem manifest itself?
- What aggravates the problem?
- What makes it better?
- What sort of housing situation is *NEEDED* or ideal?

The following commonly heard reasons, for example, would not be grounds for accommodation:

- I can't study around other people.
- I'm a light sleeper and noise bothers me.
- I get stressed or have anxiety being around roommates.
- I suffer from migraines.

Requests stating these reasons will be denied. However, we will assist you in making good choices in the room draw process or will work with you after Room Draw to make the room meet your needs. Accommodations that also include roommates are also frequently denied. Your documentation must state clearly why a particular roommate may be a part of your accommodation.

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## Procedure for petitioning for a special housing accommodation:

- Step 1** Pick up this form and read it thoroughly.
- Step 2** Fill out this form and have your physician complete the Medical Documentation for Housing or Meal Plan form .
- Step 3** Submit the form and all supporting documentation to the Office of Residential Life for review by the Director.
- Step 4** The Director will review the request and decide if more information is needed. The Director may consult with other College staff or your physician prior to making a decision. You may be contacted by College staff members for more information regarding your request.
- Step 5** The Director will make a decision regarding your request and inform you in writing of the decision. If granted, Residential Life Staff will schedule a meeting with you to discuss your accommodation.

# SPECIAL HOUSING ACCOMMODATION REQUEST FORM

(PLEASE SEE INSTRUCTIONS ON REVERSE SIDE PRIOR TO COMPLETING THIS FORM)

NAME: \_\_\_\_\_ Class Year: \_\_\_\_\_ Date: \_\_\_\_\_

CURRENT HOUSING ASSIGNMENT: \_\_\_\_\_ PHONE #: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ ROOM DRAW NUMBER: \_\_\_\_\_

HAVE YOU ALREADY HAD ANY MEDICAL DOCUMENTATION SUBMITTED TO ANOTHER  
CARLETON OFFICE? \_\_\_ YES \_\_\_ NO  
IF YES, WHAT OFFICE? \_\_\_\_\_

ACCOMMODATION REQUESTED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE EXPLAIN YOUR NEED FOR THE ACCOMMODATION: (be as specific as possible)

PLEASE ATTACH ANY SUPPORTING DOCUMENTATION OR HAVE IT MAILED TO:

OFFICE OF RESIDENTIAL LIFE  
CARLETON COLLEGE  
ONE NORTH COLLEGE ST.  
NORTHFIELD, MN 55057  
507-646-4072 PHONE  
507-646-7373 FAX  
RESLIFE@ACS.CARLETON.EDU