



CHARLES "CHUCK" W. LINDBERG ELECTRICAL TRAINING CENTER

Sponsored by Local 292, IBEW & Minneapolis Chapter of NECA

Minneapolis Electrical JATC

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Training Excellence since 1946 for the Minneapolis Electrical Joint Apprenticeship & Training Committee

Request for Reasonable Accommodation Form for Apprentices

If you have a physical or mental impairment (including learning disabilities) that you believe may affect your ability to complete any aspect of the apprenticeship, you may be eligible for accommodation. The information requested below, and any documentation regarding your disability or your need for accommodation, will be considered strictly confidential and will not be shared with any outside source without your express written permission.

Name of Individual Making the Request

Telephone Number

Email Address

Date of Request

ACCOMMODATION REQUESTED *(Be as specific as possible, e.g. adaptive equipment, interpreter, schedule change):*

REASON FOR REQUEST AND DESCRIPTION OF DISABILITY (attach appropriate documentation):

If accommodation is time sensitive, please explain.

In most cases, you will need to provide: (1) DOCUMENTATION OF YOUR DISABILITY and (2) DOCUMENTATION OF THE NEED FOR THE ACCOMMODATION YOU HAVE REQUESTED. This documentation should be from a person qualified to render a medical or expert opinion regarding your disability. For example, documentation of learning disabilities might come from psychologists, school L.D. specialists or other school records; documentation of psychological disorders might come from psychiatrists, psychologists or licensed clinical social workers, or a physician may be qualified to render opinions on specific conditions. Please discuss the type of documentation available and needed for your disability with a JATC official representative and arrange for said documentation to be provided immediately to the JATC.

Signature

This section to be completed by the JATC after review of the accommodation request.

FINAL RESOLUTION: (Describe details and attach all other documentation)

INDIVIDUAL'S ACKNOWLEDGMENT

I accept the accommodation(s) identified above and offered to me by the JATC/AJATC and agree that they are reasonable accommodations of my disability.

Individual Requesting Accommodation

Date

TJT/ajm opeiu#12, afl-cio