NATURE OF ACCOMMODATION REQUESTED

Why do you require an accommodation (i.e. what are your restrictions or limitations)? Please be as detailed as possible.				
What type of accommodation or additional arrangements do you require to allow you to participate in your course? Please be as detailed as possible.				
Please provide any additional information that may assist us in reviewing your request. Attach any relevant documents.				
ignature: Date:				
Please submit request, by email or in person, to your instructor or associate dean as per the course outline.				
Ill requests will be responded to as soon as possible and within ve business days.				
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This information is collected under the authority of the Freedom of Information and Protection of Privacy Act. It will be used to determine your eligibility for an accommodation. If you have questions about the collection or use of this information, please contact the Office of the Vice-Provost (Student Experience) at vpse@ucalgary.ca.