



**Americans with Disabilities Act (ADA)
Accommodations Request Form**

Mississippi Delta Community College is committed to equal employment opportunity and affirmative action for the disabled. As a government contractor, the Mississippi Community College Board Executive Office is subject to the Americans with Disabilities Act of 1990 (ADA), and therefore must comply with governmental recordkeeping, reporting, and other requirements.

A disable person is defined as:

1. An individual who has a physical or mental impairment that substantially limits a major life activity;
2. An individual who has a record of a substantially limiting impairment; and
3. An individual who is regarded as having substantially limiting impairment.

Those who believe themselves covered by the Act and who wish to benefit under Mississippi Delta Community College's Affirmative Action Plan are asked to identify themselves. All information will be considered confidential except (1) supervisors may be informed regarding work restrictions or accommodations; (2) emergency response workers may be informed for first aid purposes; (3) governmental officials investigating compliance of the Act will be informed. Choosing not to provide this information will not result in adverse treatment or disciplinary action.

ADA information is not applicable.

Signature

Date

I choose not to provide ADA status information.

Signature

Date

DATE: _____

NAME: _____

SEX: M F (Circle One)

MDCC EMPLOYEE ID #: _____

BIRTH DATE: _____

POSITION TITLE: _____

DEPARTMENT/OFFICE: _____

BRIEFLY DESCRIBE YOUR DISABILITY:

Please describe any reasonable accommodations that you request Mississippi Delta Community College to make to enable you to perform your job in a proper and safe manner.