



SOUTHWESTERN ADVENTIST UNIVERSITY

Residence Hall/Meal Plan Accommodation Request

If you are a student with a documented disability who requires Residence Hall or Meal Plan accommodations. Please contact the Disability Services Office as soon as possible. It is recommended that you do this at least 2 months prior to the beginning of the semester for Residence Hall Accommodations.

Students must complete the Request for Residence Hall/Meal Plan Accommodation form and provide supporting documentation. Requests are determined on a case-by-case basis with respect to sufficient documentation that:

1. indicates the existence of a disability and the impact of disability in the housing environment,
2. the existence of a barrier to access that exists within the housing, and
3. a request for reasonable accommodation that would remove the barrier identified.

While having a single room or being exempt from the meal plan might make managing the symptoms of a disability easier for a student, the Disability Services Office is only responsible for removing barriers to access for students with disabilities. Therefore, the Disability Services Office is unable to approve requests that do not specifically address inaccessibility. For example, documentation that states that, “the student would benefit from...” or “it would be easier if...” will not likely meet the criteria for accommodation.

Requests for a private room or semi-private bathroom based on an assumption that the symptoms of disability will negatively impact a roommate or vice versa do not meet the criteria of inaccessibility. The Disability Services Office will review requests within ten (10) business days upon receipt of all necessary documentation (including the Request for Housing/Dining Accommodation form completed by the student and medical documentation that meets criteria).

Once a decision has been made, the Disability Services Office will notify students via email indicating if the accommodation request has been approved or if it was determined that the documentation provided was not sufficient to support the request.

If the requested accommodations are deemed reasonable and supported by documentation, the Disability Services Office will notify the Deans or Cafeteria via email as soon as the decision has been made.

PLEASE NOTE:

- A **documented medical condition** does not necessarily indicate that a student qualifies as a student with a disability who requires accommodation.
- Requests for waivers of meal plans will need to accompany a meeting/discussion with the Cafeteria Chef to determine if dietary needs are not able to be met. If dining is unable to provide appropriate nutritional meals to meet a student’s specific medical needs (based on documentation provided), then requests for modification or waiver to a meal plan will then be considered.



SOUTHWESTERN ADVENTIST UNIVERSITY

NAME: _____ DATE: _____

ID#: _____ PH# _____

EMAIL: _____

SEMESTER ACCOMMODATION INFORMATION

In what year/semester do you plan to start living on campus if you request a Residence Hall/meal plan accommodation?

ADDITIONAL INFORMATION AND DETAILS

1. What accommodation are you requesting for the Residence Hall/Meal Plan?
2. Please provide information about your disability type and the symptoms that make Residence Hall/meal plan on-campus inaccessible without accommodation(s).
3. Please provide details regarding barrier(s) that prevent(s) access to the residence hall/meal plan if the accommodation request is not approved.
4. Are you requesting a release of contract as a result of inaccessibility to the Residence Hall/meal plan?

If so, what steps have you already completed with Housing/Dining to address this need?

AUTHORIZED SIGNATURE

I certify that I am the student listed above and that the information on this form is correct to the best of my knowledge. I agree I disagree

Signature

Date