



## DEPARTMENT OF THE ARMY

FORT RILEY, KANSAS 66442

Office Symbol:

Date:

Memorandum for Record

Subject: **Request for Reasonable Accommodation**

### 1. Individual Information:

Applicant or Employee Name:

Email:

Phone:

Pay Plan, Series and Grade:

Date of Request:

Job Title:

Organization:

Information completed by:

**2. Accommodation Requested** [Be as specific as possible in stating the request, for example, adaptive equipment, an interpreter, a reader, etc.]

**3. This request is necessary because** [State the reason for the request. If accommodation is time-sensitive, please explain.]

**4. Log Number** (Assigned by EEO DPM):

Date:

Employee's Signature \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_