



Office of Diversity,
Equity & Inclusion

University of Massachusetts Dartmouth,
North Dartmouth, MA 02747-2300

Office: 508-999-8008
Fax: 508-999-9201
TTY: 508-999-9250

Prospective Candidates Requesting Reasonable Accommodation

In compliance with ADA, if you have a disability and would like to request a reasonable accommodation in order to fully participate for a position at UMass Dartmouth, please review and forward the accommodation form below to the Office of Diversity, Equity & Inclusion. Also, you may call 508-910-6405 or send a message via email to oeo@umassd.edu.

It is the policy of the University of Massachusetts, Dartmouth (the “University”), which is ensured by the Office of Diversity, Equity & Inclusion that qualified individuals with disabilities not be discriminated against on the basis of their disability with regard to job application, hiring procedures and other terms and conditions of employment. As such, the Office of Office of Diversity, Equity & Inclusion handles all issues relating to ADA Amendments Act of 2008. All requests for accommodations will be reviewed on a case by case basis by the Office of Diversity, Equity & Inclusion.

With respect to the hiring process, an applicant with a documented disability submits a request for a reasonable accommodation. The Office of Diversity, Equity & Inclusion reviews and determines if a confidential adjustment to the hiring process is necessary to enable the applicant to be considered for the position he/she desires, unless the accommodation would impose an undue hardship for the University.



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“CONFIDENTIAL”

REQUEST FOR REASONABLE ACCOMMODATION - HIRING PROCESS

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DIRECTIONS: If you are a qualified applicant seeking a reasonable accommodation under the provisions of the Americans with Disabilities Act as amended, please complete this form. It is strongly recommended that requests for accommodations be made as soon as possible to avoid delays in providing reasonable accommodations.

Date: _____

[] I am applying for a position with the University of Massachusetts and need a reasonable accommodation in order to participate in the hiring process.

Name: _____

Home Address: _____

Email address: _____

Telephone: _____

Cell Phone: _____

Title of the Job or position: _____

College and Department of the position: _____

Please identify the impairment(s) that you believe are affecting your ability to participate in the hiring process.

Please describe the accommodation(s) you are requesting as well as any alternative accommodations.

Explain how the requested accommodation(s) will allow you to participate in the hiring process.

Are there any aspects of the hiring process you will be unable to complete, with or without the requested accommodation(s)? Please explain.

The Office of Diversity, Equity & Inclusion may need to discuss your request more fully with you in order to understand your disability; why you need an accommodation; and how a proposed accommodation would enable you to participate fully in all aspects of the hiring process. If your disability and need for accommodation are not obvious, the Office of Diversity, Equity & Inclusion may ask you for reasonable documentation from your physician, licensed healthcare practitioner, or other appropriate professional explaining the disability and why an accommodation is necessary. **Adherence to confidentiality is expected of all individuals directly and indirectly involved with the reasonable accommodation process and its final determination.**

This form must be submitted to the Office of Diversity, Equity & Inclusion

Foster Administration Building, Room 305