



# BLM National Training Center

## Reasonable Accommodation Request for Training

First Name	Bureau/Agency	Supervisor
Last Name	Duty Station	Supervisor Phone
Email	Course	
Phone	Location	Start Date

**Is there a current accommodation at your office that will need to be mirrored during training?** (Please describe)

No    Yes

### What accommodations are being requested?\*

#### Training Accommodations

- Headsets
- Enlarged Print
- Closed Captioning
- Interpreter
- Other
- Preferential Seating
- Adapted Reading Materials
- Early Access to Training Materials

#### Testing Accommodations

- Use of Calculator
- Adjusted Time
- Quiet or Separate Setting for Testing
- Other

*\*Lists do not include all types of accommodations*

**Please describe the activities listed in the DOI Talent course description that you may not be able to perform. (You may be contacted by the course coordinator to discuss classroom and field trip conditions in greater detail.) (i.e. sitting/standing/walking/hiking/temperature/severe allergies, etc...)**

It is the student's responsibility to make a disability known if requesting an accommodation. The student may be asked to provide proper medical documentation from a medical provider describing a diagnosis, limitations, and recommended academic adjustments and/or auxiliary aids, if requested.

When possible, please submit requests for interpreters or other Reasonable Accommodations to the NTC no later than 45 days prior to the start of the class in order to allow time for the training personnel to make appropriate arrangements for adaptive services and equipment. All requests will be considered, however, last minute requests may require the student to reschedule their training.

**The student understands that academic adjustments and/or auxiliary aids are not automatically granted.**

Student Signature

**Sign and e-mail the completed form to [BLM\\_TC\\_RArequest@blm.gov](mailto:BLM_TC_RArequest@blm.gov)**

CONFIDENTIALITY: The Rehabilitation Act requires that all medical information be kept confidential. Medical information obtained will only be shared with the individual involved in the various aspects of providing reasonable accommodations or those who have a need to know as described in [Personnel Bulletin 14-01 on Reasonable Accommodation for Individuals with Disabilities](#)

Deciding Official Signature

Request Approved

Request Denied