

# National Guard Bureau (NGB) Army and Air National Guard Readiness Centers

NGB- Equity and Inclusion (NGB-EI) Office

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## Interim Reasonable Accommodation Guide

May 2020

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## Procedures to Facilitate the Provision of Reasonable Accommodation (RA)

*Reasonable accommodation removes workplace barriers for individuals with disabilities. Reasonable accommodation is available to qualified employees regardless of whether they work part-time, full-time, or job applicants.*

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# **.REASONABLE ACCOMODATION GUIDE**

## **References**

- A. Section 501, Rehabilitation Act of 1973, as amended, 29 U.S.C.§ 791
- B. Americans with Disabilities Act Amendments Act of 2008, Titles I and V
- C. Executive Order 13164 of 26 July 2000
- D. 29 Code of Federal Regulations § 1630
- E. EEOC Management Directive 715 (MD-715), 1 October 2003
- F. Equal Employment Opportunity and Diversity, Army Regulation 690-12, Appendix C, 12 December 2019
- G. Equal Employment Opportunity and Affirmative Employment Programs, AFI 36-205, Chapter8, 1 December 2016
- H. EEOC Enforcement Guidance: Reasonable Accommodation and Undue Hardship Under the Americans with Disabilities Act, 17 October 2002
- I. Nondiscrimination on the Basis of Handicap in Programs and Activities Assisted or Conducted by the Department of the Army, 15 December 1993
- J. Executive Order 13548, 26 July 2010

## **Purpose**

The purpose of this guide is to establish guidance, outline roles and responsibilities and implement the provisions of the Reasonable Accommodations (RA) and Personal Assistance Service (PAS) request.

## **Applicability and Scope**

This guides applies to the National Guard Bureau NGB, the National Guard Readiness Centers (NGRC) in the National Capital Region (NCR) and satellite field offices, it covers civilian personnel, and civilian and military supervisors of civilian personnel, all appropriated (APF) and non-appropriated (NAF) civilian employees and applicant(s) for employment.

## **Policy**

The NGB, and the NGRCs provide reasonable accommodations to employees and applicants with disabilities. The NGB, and NGRCs reasonable accommodation policy is an important aspect of our commitment to create employment opportunities for individuals with disabilities in accordance with References (A) to (J). Managers/Supervisors are expected to make every effort to provide reasonable accommodations to employees with disabilities, unless in doing so would cause an undue hardship. Reassignment is the accommodation of last resort and is available only to employees, not applicants. Supervisors/decision makers will consider a reassignment only if no reasonable accommodations are available to enable the individual to perform the essential functions of his/her current position, or if the only effective accommodation would cause undue hardship.

Reassignment may be made only to a vacant position. The organization will not create new positions or displace employees from their jobs.

In accordance with the Rehabilitation Act of 1973 (29 USC §791 et seq.) as amended by the Americans with Disabilities Act (ADA) of 1990, as amended (42 USC §12101 et seq.) requires NGB to provide reasonable accommodation to qualified individuals with disabilities who are employees or applicants for employment, unless to do so would cause undue hardship. Therefore, NGB and NGRC's are committed to providing reasonable accommodations to NG employees and applicants for employment in order to ensure that individuals with disabilities have full access to equal employment opportunities at all NG enterprises. This means that the NGB and NGRC's and satellite field offices provides reasonable accommodation when:

- An applicant for employment with a disability needs an accommodation in order to be considered for a job;
- A qualified employee with a disability needs an accommodation to enable him or her to perform the essential functions of the job or to gain access to the workplace; and
- An employee with a disability needs an accommodation to enjoy equal benefits and privileges of employment those enjoyed by employees without disabilities.

NGRC's Disability Program Manager (DPM) or the Disability Program Coordinator (DPC) will assist management to process requests for reasonable accommodation and, when appropriate, provide reasonable accommodations in a prompt, fair, and efficient manner.

This Guide provides instruction on how to comply with Equal Employment Opportunity Commission ("EEOC") regulations on agency implementation of The Rehabilitation Act of 1973 (29 USC §791 et seq.) as amended by the Americans with Disabilities Act (ADA) of 1990, as amended (42 USC §12101 et seq.), and 29 C.F.R. § 1614.203. The NGRCs will apply the standards set forth in Title I of the ADA Amendments Act of 2008 ("ADAAA") when determining whether and to what extent to provide reasonable accommodation under the Rehabilitation Act. *The ADAAA emphasizes that agencies should construe the definition of disability in favor of broad coverage of individuals, making it easier for an individual seeking protection under the ADA to establish that he or she has a disability within the meaning of the statute.*

In accordance with applicable EEOC regulation, 29 C.F.R. § 1614.203(d)(5), it is NGB's policy to provide access to personal assistance services ("PAS") to individuals with targeted disabilities. NGRCs will process requests and make determinations for PAS in the same manner as it processes requests and makes determinations for reasonable accommodation.

## Definitions

- A. Accessible: Enterable, operable, safely usable, or otherwise open to participation, independently and with dignity, by a person with a disability. The term “accessible” can apply to a work environment, service, program, etc.
- B. Appeal: A voluntary process through which an individual can request reconsideration of a denial of a request for reasonable accommodation.
- C. Applicant: A person who has applied, or would like to apply, for employment at NGB/NGRC’s.
- D. Decision Maker: The NGRCs official with the authority to make a determination on whether or not to provide an accommodation in a given circumstance. The decision maker can be the Senior Leader, an immediate supervisor, an Office or Division Director, with authority over the appropriate office or division, or the Director or Deputy Director of the Office of Human Resources.
- E. Denial: A written determination by the decision maker to deny a request for a specific reasonable accommodation where the decision maker does not offer an alternative reasonable accommodation or where the requester declines an alternative reasonable accommodation offered by the decision maker.
- F. Disability: With respect to an individual, (1) A physical or mental impairment that substantially limits one or more major life activities; (2) a record of such an impairment; or (3) being regarded as having such an impairment, which means that the individual has been subjected to an action prohibited by the ADA as amended because of an actual or perceived impairment that is not both “transitory and minor.”
- G. Employee. A person employed by the National Guard (Department of the Army or Department of the Air Force).
- H. Essential Functions: The fundamental job duties of the employment position the individual with a disability holds or desires. The term “essential functions” does not include the marginal functions of the position. A job function may be an “essential function” if, among other things: (1) the reason the position exists is to perform that function; (2) there are a limited number of other employees who could perform the function; and/or (3) the function is specialized and the individual is hired based on his or her ability to perform that particular function.
- I. GINA: Genetic Information Nondiscrimination Act of 2008, Pub. L. 110-233.

- J. Grant: A written determination by the decision maker to approve either a request for a specific reasonable accommodation or a reasonable accommodation other than that requested but which both the requester and decision maker believe will be effective.
- K. Individual: The applicant or employee for whom the accommodation is requested.
- L. Interactive Process: An informal process by which the NGRC DPM/DPC will communicate with an employee or applicant who has requested a reasonable accommodation. This process will identify the specific limitations resulting from the disability and potential reasonable accommodations that could overcome those limitations.
- M. Personal Assistance Services (PAS): Assistance with performing activities of daily living that an individual would typically perform if he or she did not have a disability, and that is not otherwise required as a reasonable accommodation. Examples include, but are not limited to, assistance with removing and putting on clothing, eating, and using the restroom. Per EEOC Regulation, agencies need only provide PAS to individuals with “targeted disabilities,” as defined below.
- N. Physical or Mental Impairment: any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more body systems, such as the neurological, musculoskeletal, special sense organ, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, immune, circulatory, hemic, lymphatic, skin, and endocrine systems; or any mental or psychological disorder, such as an intellectual disability (formerly termed “mental retardation”), organic brain syndrome, emotional or mental illness, and specific learning disability.
- O. Qualified: With respect to an individual with a disability, “qualified” means that the individual satisfies the requisite skill, experience, education and other job-related requirements of the employment position such individual holds or desires and, with or without reasonable accommodation, can perform the essential functions of such position
- P. Reasonable Accommodation: (1) modifications or adjustments to a job application process that enable a qualified applicant with a disability to be considered for the position such qualified applicant desires; (2) modifications or adjustments to the work environment, or to the manner or circumstances under which the position held or desired is customarily performed, that enable an individual with a disability who is qualified to perform the essential functions of that position; or (3) modifications or adjustments that enable an employee with a disability to enjoy equal benefits and privileges of employment as are enjoyed by other similarly situated employees without disabilities.

Examples of accommodation include, but are not limited to:

- a. Making existing employee facilities readily accessible to and useable by individuals with disabilities;
- b. Job restructuring;
- c. Part-time or modified work schedules;
- d. Reassignment to a vacant position (and not just permission to compete for such a position);
- e. Acquisition or modifications of equipment or devices;
- f. Appropriate adjustment or modifications of examinations, training materials, or policies; and
- g. Provision of qualified readers or interpreters.

Q. Requester: The person who requests the reasonable accommodation or PAS. The requester can be the disabled applicant or employee, or a family member, healthcare professional, or other representative of the disabled applicant or employee.

R. Targeted Disability: a disability that is designated as a “targeted disability or health condition” on the Office of Personnel Management’s Standard Form 256 or that falls under one of the first 12 categories of disability listed in part A of question 5 of the Employment Opportunity Commission’s Demographic Information on Applicants form. Targeted disabilities include, but are not limited to, deafness or serious difficulty hearing, blindness or serious difficulty seeing even when wearing glasses, missing extremities, partial or complete paralysis, significant mobility impairment, intellectual disability, and significant psychiatric disorders.

## **Initiating the Reasonable Accommodation Process**

### **Who Can Submit a Request for Reasonable Accommodation?**

- An employee or an applicant for employment.
- A family member, friend, health professional, or other representative may request RA on behalf of an individual with a disability.

### **Identify the Request for Reasonable Accommodation**

- For tracking purposes, the Reasonable Accommodations Coordinator requires written request from either the RA requestor or the supervisor (Attachment 1); however, the manager/supervisor cannot ignore an initial oral request. Management must engage in an informal interactive process to clarify what the employee specifically needs and identify the appropriate RA. Appendix A, provides resources available to employers to help identify appropriate accommodations.

- A request can be made in “plain English”. The Americans with Disabilities Act, Rehabilitation Act, or the phrase “reasonable accommodation” do not have to be referenced in order for a request to be considered a request for RA.
- Once the RA request is made to the Supervisor, the Supervisor must submit the RA request to the RA Coordinator within two (2) business days, the RA Coordinator starts the management of RA process. A copy of the request will also be forwarded to the Chief, NGB, Office of the Chief Counsel, Litigation and Employment Law Division, for information purposes.
- Supervisor/manager and RA Coordinator will hold interactive discussions with the employee immediately and throughout the entire process as needed to assist in making the determination whether the employee is a qualified individual with a disability and to determine if medical documentation is necessary.
- An employee who requires a RA on a repeated basis (e.g., a sign language interpreter) does not need to submit a new written request each time an accommodation is needed.
- The RA request must include a statement for an adjustment or change at work to a reason related to a medical condition.
  - EXAMPLE 1. “I’m having trouble getting to work at my scheduled starting time because of medical treatments I’m undergoing.”
- **Do not disclose** that an employee is receiving RA because it usually amounts to a disclosure that the individual has a disability.

## **Requesting a Reasonable Accommodation**

A request for reasonable accommodation is a statement that an individual needs an adjustment or change in the application process, at work, or in a benefit or privilege of employment for a reason related to a disability.

A person may initiate any request for reasonable accommodation **orally or in writing at any time.** *Doing so initiates the interactive process.* The requester does not need to:

- Fill out any specific form in order to initiate the interactive process;
- Have a particular accommodation in mind before making his or her request;
- Use any special terms like “reasonable accommodation” or “disability” when making his or her request.

In light of the above guidance, NG managers or supervisors and other employees should recognize that a person may not always state a request for reasonable accommodation plainly.

A request is any communication in which an individual asks or states a need for the NGB, NGRC's to provide or to change something because of a medical condition. A person does not have to specify a particular accommodation although it is helpful if he or she can suggest one. It is sufficient for the individual requesting accommodation to state that some sort of change or assistance is required.

A manager or supervisor should know that a request for a reasonable accommodation can be a statement in "plain English" that an individual needs an adjustment or change in the application process or at work for a reason related to a medical condition.

If an employee or applicant raises any of the following points, he or she is likely requesting a reasonable accommodation:

- The person is talking about some type of medical condition that is impacting his or her work;
- The person mentions some sort of physical/intellectual/psychiatric challenge that is impacting his or her work;
- The person requests an adjustment or change to the workplace;
- The person openly discloses a disability or medical condition;
- The person states that he or she needs assistance performing a job function.

Whenever a supervisor or other employee is uncertain as to whether a person seeks reasonable accommodation, he or she shall ask that person for clarification.

A requester does not need to have previously disclosed the existence of a disability prior to requesting a reasonable accommodation.

An **Applicant** may request a reasonable accommodation from any Human Resources Specialist or RA Coordinator, the selecting official, or any NGB, NGRC satellite RA Coordinator connected with the staffing application process. In cases when an applicant does not make a request to a Human Resources Specialist, the selecting official or NGB, NGRC RA Coordinator must forward the request to the Office of Human Resources as soon as possible, but in any event, **no later than 2 business days after receiving the request.**

An **Employee** may request a reasonable accommodation from one of the following officials:

- His or her immediate supervisor, as well as any another supervisor or manager in the employee's chain of command; or

- The Director or Deputy Director of the Office of Human Resources, or a designated Human Resources Specialist; NGB, NGRC RA Coordinator or NGB-EI Disability Program Manager/Coordinator.

In cases when an employee does not make a request to the ultimate decision maker, the official who receives the request will forward the request in writing to the appropriate decision maker as soon as possible, but in any event, **no later than 2 business days after receiving the request.**

A family member, healthcare professional, or other representative may request a reasonable accommodation on behalf of a National Guard (Army or Air) applicant or employee. Under such circumstances, the requester should submit the written request to the same persons to whom the employee or applicant would make the request.

Any National Guard (Department of the Army Department of the Air Force) applicant or employee may consult with the Director or Deputy Director of the Office of Human Resources, or a designated Human Resources Specialist; NGB-EI Disability Program Manager/Coordinator for further information or assistance in connection with requesting or processing a request for reasonable accommodation.

### **NGRCs and Satellite Office Personnel Responsible for Handling Requests**

Each organizational element shall designate those officials delegated principal responsibility for identifying possible accommodations and for determining whether an accommodation will be provided. The Decision-maker may differ depending on whether the request is initiated by an employee or an applicant, or the type of accommodation being requested. As explained above, the NGB or NGRC staff member who receives a request for reasonable accommodation must forward such request to the appropriate decision maker as soon as possible, but in any event, **no later than 2 business days after receipt.**

For example, the Decision-maker could be as follows:

- the organizational element Human Resource Specialist responsible for the recruitment and/or selection process if the request for accommodation is from an applicant;
- the organizational element Disability Program Manager if the accommodation requested is for adaptive equipment, a reader or sign language interpreter, removal of an architectural barrier, accessible parking, or materials in alternative formats;
- the head of the office or his/her designee where the accommodation requested involves personnel actions; or
- if the requests are from an employee, the Decision-maker might be the employee's immediate supervisor or the head of the office.
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All decision makers must designate reserve officials who can continue receiving, processing, and providing reasonable accommodations when the decision maker is not available.

To ensure that NGB, NGRCs handle reasonable accommodation requests consistently and fairly throughout the organization, the decision maker shall inform, and consult with, the Office of Human Resources and Facilities management when deemed necessary as to all such requests prior to making a final written decision.

## **Responsibilities**

### **NGB Equity and Inclusion (NGB-EI) Office shall:**

- Communicate and implement NGB's policy for the processing of reasonable accommodation requests.
- Allocate sufficient personnel to staff the reasonable accommodation function within NGRCs.
- Ensure that officials responsible for processing reasonable accommodation requests are trained on program requirements, to include relevant legal principles/precedent.
- Ensure that all reasonable accommodation requests are processed within the applicable timeframe which is within 30 days of the request.

### **Reasonable Accommodations Coordinator: (NGB-EI DPM Interim)**

- Manage and assist in coordinating all reasonable accommodation requests.
- Ensure that all reasonable accommodation requests are processed in accordance with applicable references.
- Collaborate with supervisor(s) during the on-going, informal interactive discussion(s) with the individual seeking an accommodation.
- Involve appropriate personnel who provide recommendations to the person responsible for making the decision on a request for reasonable accommodation.
- Update the appropriate tracking and monitoring system for reasonable accommodation requests.
- Maintain all reasonable accommodation case files in a secure manner.
- Ensure the confidentiality of medical information. Access to this information is limited to a need to know in accordance with applicable law and regulation including HIPPA.
- Medical records will be maintained separately from personnel records, and if required, will be maintained by Health Care Providers in accordance with HIPPA.

### **Managers and Supervisors shall:**

- Immediately contact the RA Coordinator upon knowledge of or receipt for request for a reasonable accommodation, **within two (2) business days**.
- Process all reasonable accommodation requests in accordance with the procedures outlined in this guide.
- Maintain an open line of communication with the employee seeking an accommodation and engage in on-going, informal discussion(s) with the employee during the reasonable accommodation process.

- Management Officials will determine the approval or denial of an RA within 30 days of the initiation of a request. If a decision maker does not immediately grant the requested accommodation, he/she must consult directly with the RA Coordinator. The RA Coordinator will coordinate, as needed, with the servicing Litigation and Employment Law Division counselor/agency attorney before providing the decision maker with any recommendations. Legal reviews must be conducted for all proposed denials of a reasonable accommodation or the particular accommodation requested.

**An Employee and/or Applicants for employment shall:**

- Employees will immediately notify their first-level supervisor or the RA Coordinator when it is determined that some form of reasonable accommodation is required in order to perform the essential functions(s) of their position of record.
- Request a RA/PAS during the application process.
- Request a RA when she/he knows that there is a workplace barrier that is preventing her/him, due to a disability, from effectively competing for a position, performing a job, or gaining equal access to a benefit of employment.
- Actively participate in the interactive discussion portion of the reasonable accommodation process.
- Provide all documentation, to include medical documentation, if requested, as part of the reasonable accommodation process.

**Joint Human Capital Management (JHCM) shall:**

- JHCM will be the first line of effort in providing Applicants for Employment with disabilities the support required.
- Participation in the application process; RA or PAS must be provided to a qualified applicant with a disability in order to have an equal opportunity to participate during the application process.
- Hiring process; Inform all applicants for employment what the hiring process involves, e.g., interview, timed written test, or job demonstration; ask all applicants whether they will need a RA for this process; and explain the RA procedures.

**Confirming Documentation**

Although an **employee** may initiate a reasonable accommodation request orally, for record keeping purposes, and upon receiving any request **other than one for assistive technology and/or services**, the decision maker should ask the employee (or someone acting on the employee's behalf) to complete the *Confirmation of Request for Reasonable Accommodation or Personal Assistance Services* Form (Attachment 1). Should the employee fail to complete this form, the employee's

immediate supervisor or the decision maker shall complete it on the employee's behalf and seek the employee's consent before adding the form to the employee's personnel file.

For any request in which the employee **requests assistive technology and/or services**, the decision maker should request that the employee complete a *CAP Accommodation Request* online at [www.cap.mil](http://www.cap.mil) or complete the form on the employee's behalf.

NGB, NGRC's RA Coordinator will begin processing a request for reasonable accommodation as soon as it is made, whether or not the employee provides written confirmation as described in this Section.

### **Processing Reasonable Accommodation Request**

1. Once an applicant or employee (or a person acting on their behalf) makes a request for reasonable accommodation, the requester and decision maker will begin the interactive process to determine whether and to what extent the NGB, NGRC or satellite office will provide reasonable accommodation.

The decision maker will:

- Explain to the requester that he or she (i.e., the decision maker) will determine whether or not the NGB, NGRC or satellite office will provide reasonable accommodation; and
- Describe the decision making process to the requester.

2. When a third party makes a request for accommodation on an individual's behalf, the decision maker should, if possible, confirm with the applicant or employee that he or she, in fact, wants a reasonable accommodation before proceeding further with the interactive process.

3. Management must communicate with the requester early in the interactive process and periodically throughout the process regarding his or her request to ensure the complete exchange of relevant information. To track the processing of his or her request, the requester may, at reasonable intervals, ask that the decision maker describe the status of his or her request, preferably in writing.

4. Ongoing communication is particularly important where the specific limitation, barrier, or problem is unclear; when an effective accommodation is not obvious; or when the parties are considering different possible reasonable accommodations.

5. As noted above, a supervisor should know that a request for a reasonable accommodation can be a statement in "plain English" that an individual needs an adjustment or change in the application process or at work for a reason related to a medical condition. The request does not have to include the terms "ADA" or "reasonable accommodation," and the request does not have to be in writing, although the supervisor may ask for something in writing to document the request. A family

member, friend, health professional, rehabilitation counselor, or other representative also may request a reasonable accommodation on behalf of an NGB employee with a disability.

6. The management or decision maker must take a proactive approach in searching out and considering possible accommodations. To that end, and as explained above, the decision maker shall consult with the Office of Human Resources with respect to all requests for reasonable accommodation. The decision maker may consult with other appropriate offices and resources as necessary, including the NGB, Office of the Chief Counsel, Litigation and Employment Division, the Office of Information Resources Management, the Administrative Services Office (including via submission of necessary requisitions), and, in the case of assistive technology, devices, and services, the Department of Defense's Computer/Electronic Accommodations Program ("CAP"). The requester should also participate, to the extent possible, in identifying an effective reasonable accommodation.

### Coordination of Efforts

- When the RA Coordinator or Management is notified of the need for RA, coordination between the RA Coordinator and Management will take place within two (2) business days. The initial email will include Attachments 1, 2, and 3.
- Requests for RA that will require funding by NGB or NGRCs will be analyzed and processed by the RA Coordinator and when necessary Medical and Legal personnel. Final Approval/Denial will be made by the employee's responsible Management in writing, after a legal review by the servicing Litigation and Employment Law Division counselor/agency counsel.
- If the employee deviates from the RA process and contacts the RA Coordinator prior to an interactive discussion with their supervisor, the RA Coordinator will contact the supervisor of the individual immediately upon receipt of request; the supervisor is best able to identify and define the essential functions of a position.
- Supervisor/Manager will engage in the interactive process with the requesting employee. At times, when an accommodation can be made without obligation of funding, supervisor/manager may approve a request for RA. Supervisor/manager will complete Attachments 1 and 5, and forward them to RA Coordinator within two (2) business days of approval for tracking and oversight.
- Special circumstances may influence the timing of the RA process. The expedited processing of a RA request may be appropriate in the following situations:
  - The RA is needed to enable a person to apply for a job; or
  - The RA is needed for a specific activity that is scheduled to occur shortly.
- **The organization has thirty (30) business days to process a request.** If unable to process the request in 30 business days, the RA Coordinator will notify the supervisor who must document

and communicate in writing to the requestor reason for the delay. This time period does not include waiting to receive information from the requestor/healthcare provider or the time it takes to receive adaptive equipment.

## **ASSESSING THE DISABILITY CLAIM**

### **Determine if the employee has a disability.**

- An individual meets the Americans with Disabilities Act definition of “disability” that would qualify them for reasonable accommodations if they have “a physical or mental impairment that substantially limits one or more major life activities (sometimes referred to in the regulations as an “actual disability”).” If a disability is not obvious to an employer, they can ask for medical documentation from a health care provider to confirm the need for an accommodation. (Attachment 2) All supporting medical documentation must be in English.
- Does the employee have a physical or mental impairment that substantially limits one or more of his/her major life activities?
  - Physical Impairment. Any physiological condition or disorder, cosmetic disfigurement, anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory, cardiovascular, reproductive, digestive, genitourinary, immune, circulatory, hemic, lymphatic, skin, and endocrine.
  - Mental Impairment. Any mental or psychological disorder such as, intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities.
  - Major Life Activity. Illustrative, non-exhaustive list of major life activities include caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, speaking, standing, lifting, bending, communicating, thinking, learning, breathing, sitting, reaching, interacting with others, reading, concentrating, working. Major life activities also include the operation of major bodily functions, such as functions of the immune system, special sense organs and skin, normal cell growth, digestive, genitourinary, respiratory, circulatory and cardiovascular functions.
- Exceptions. If an employee is currently using illegal drugs, to include illegal usage of legal drugs such as prescription medications, the employee does not meet the definition of an employee with a disability.

### **Determine if the Individual is a Qualified Individual with a Disability.**

- A “qualified individual with a disability” is an individual who, with or without an accommodation can:

- Perform the essential functions of the position in question.
- Meet the prerequisite skill, experience, education and other job-related requirements of the position in question.
- Meet the criteria for appointment under one of the special appointing authorities for individuals with disabilities.

**Management and JHCM will:**

- Determine if employee can perform essential functions of the positions.
- To be qualified for a position, an applicant or employee must be able to perform essential job functions. Essential functions are job duties that are fundamental to the position, they are the reason the job exists. Some of the factors for determining essential functions of a job include:
  - Whether the position exists specifically to perform these essential functions.
  - The number of other employees who are available to perform the same job duties.
  - The expertise or skills required to perform the essential functions.
  - Can the employee perform the essential functions of the position, with or without an accommodation?
  - The essential functions of a job are not the marginal or infrequently performed tasks that could be eliminated without altering the fundamental nature of the job.
  - In some cases, an accommodation may involve restructuring a job or altering the nonessential requirements of a particular position. Job restructuring includes modifications such as:
    - Reallocating or redistributing marginal job functions that an employee is unable to perform because of a disability; and
    - Altering when and/or how a function, essential or marginal, is performed.

**NOTE:** Remember that the goal of RA is to enable qualified individuals with disabilities to perform the essential functions of their position and to enjoy equal employment opportunities, unless doing so would impose an undue hardship on the operation of its programs and/or poses a direct threat to the employee or others. At time a Position Description does not capture all of the essential functions of job. If necessary, a Documentation of Essential Functions form will need to be completed by the Supervisor and the employee's physician (Attachment 3).

### **FMLA Coordinator will:**

- Manage all documentation for Medical requests.
- Medical documentation may be required to assist in determining whether or not a person is a qualified person with a disability. If appropriate and with the employee's consent, an examination by a medical specialist of the NGB, NGRCs choosing and expense may also be required.

### **Confidentiality Requirements Regarding Medical Information.**

- Under the Rehabilitation Act, medical information obtained in connection with the RA process must be kept confidential. All medical information obtained in connection with a request must be kept in a secure location in locked files separate from the employee's official personnel file. Any employee who obtains or receives such information is strictly bound by confidentiality requirements and may disclose this information only as follows:
  - Management officials who need to know (including the decision maker who requested the medical information be obtained) may be told about necessary restrictions of the work or duties of the employee and about the accommodations necessary for the employee to perform her/his duties. However, information about the employee's general medical history should only be disclosed if strictly necessary.
  - First aid and safety personnel may be informed, when appropriate, if the employee might require emergency attention or treatment because of the disability.
  - Information may be given to government official or contractors assigned to investigate agency compliance with the Rehabilitation Act.

### **Perform an Individualized Assessment of the Disability and Disability Analysis.**

- To determine whether the individual has a disability, an individualized assessment must be made by medical professionals.
- Decisions cannot be made based upon personal knowledge of, or experience with, a particular condition or generalizations based upon stereotypes or myths.
- Decisions made about RA, are very fact-specific and individualized. There is one condition which does not necessitate this individualized assessment, AIDS or HIV positive. This condition is considered disabling even if there are no symptoms.
- Once all relevant information has been obtained from the employee, the RA Coordinator must conduct an analysis to determine whether the employee meets the definition of a qualified individual with a disability and communicate the findings with management.

- The analysis and the management decision must be documented in writing by the RA Coordinator and filed for the record in the case file.

## **DECISION TO GRANT ACCOMMODATE or DENY an ACCOMMODATE**

### **Decisions to Grant an Accommodation.**

- If the RA Coordinator determines that providing an accommodation is the appropriate course of action, all reasonable alternatives to accommodate the individual in their current position will be explored, e.g., assistive software/devices, modified furniture, location of desk, job restructuring, telework, etc. The employee will be notified in writing,
- Hold an interactive discussion with the employee – they can advise the supervisor what she/he thinks is needed to enable them to perform the job.
- Consult with other management officials, facilities, safety and/or medical personnel, to determine whether the employee’s proposed accommodation is feasible and/or whether the accommodation can be made.
- An employer must respond expeditiously (within 30 business days) to a request as a lack of action amounts to a denial.
- The deciding official for RA is the employee’s Management Official or JHCM for applicants.

### **Reasonable Accommodation Options.**

- Personal Items. The NGB, NGRCs are not required to provide personal use items, i.e., glasses, hearing aids, wheelchairs.
- Select the accommodation that is the most appropriate for both management and the individual. It does not need to be the best or most expensive, or even the one preferred by the employee. As long as the accommodation is reasonable and enables the employee to perform the essential functions of their position, it is acceptable.
- The determination to accommodate an employee should be completed within **30 business days** from the date the individual’s supervisor receives the request for accommodation. **This timeframe may be extended due to extenuating circumstances.** The employee will be notified, in writing, of the decision to approve or deny the request for RA.

## **Reasonable Accommodation Denial**

- If a RA is denied, the RA Coordinator in conjunction with management will present the Denial of Accommodation Request form with an explanation of the reason or reasons for denial. The Denial of Accommodation Request form must:
- Use plain language and provide as much specific information as possible.
- Identify the office that made the decision and obtain the supervisor/management official's signature.
- If a specific RA is denied but an alternative RA is offered, the notice should explain the specific reason(s) for the denial and the reason that another accommodation is considered as a good alternative.
- Response is coordinated with the NGB-EI/DPM office before the decision is given to the employee.
- Supervisor/manager will coordinate with the agency representative; NGB Office of the Chief Counsel, Litigation and Employment Law Division for legal review prior to the proposed denial of the RA.
- RA Coordinator will inform the "Requester" of their right to file an EEO complaint (informal phase) within 45 calendar days after the denial if the Requester believes that she/he has been discriminated against on the basis of her/his disability.
- The notice must also include procedures on how to file a complaint through EEOC, Merit Systems Protection Board (MSPB) or through a Union Grievance.

## **Personal Assistance Services (PAS)**

The process for requesting PAS, the process for determining whether PAS are required (including whether the individual has a targeted disability), and Disability Program Manager's right to deny a request for PAS when providing PAS would pose an undue hardship, are the same as those for requests for reasonable accommodation provided in this directive.

NGRC's and satellite offices will not provide PAS outside of the scope of working hours.

## **Time Limits**

It is the NGB's goal to provide reasonable accommodations as quickly as possible to remove the workplace barriers for an employee or applicant. Full and open communication between the employee, the decision-maker, and the reasonable accommodation team (NGRCs/JHCM) is a

critical component of the accommodation process, and helps to ensure that there is a full exchange of relevant information so the Organization can make appropriate decisions.

NGRC's and satellite offices will process requests for reasonable accommodation and provide reasonable accommodation, where appropriate, in as short a timeframe as is reasonably possible, absent extenuating circumstances. The precise time necessary to process a request will depend on the nature of the accommodation requested and whether the RA Coordinator must obtain supporting information.

***Normal processing:*** With respect to those requests for which the RA Coordinator and management official do not require any supporting medical information, and for which no extenuating circumstances apply; the NGRC's or satellite office will process, make a final determination regarding whether and to what extent to provide reasonable accommodation, and provide reasonable accommodation by no later than **30 business days from receipt of the request.** The 30-day time limit for either providing and/or denying an accommodation starts as soon as the accommodation is first requested, regardless of the need for supplemental documentation. The deciding official may not wait to begin processing the request until the date the agency receives sufficient medical information. As soon as the decision maker makes a final determination regarding whether and to what extent to provide reasonable accommodation, he or she or shall immediately communicate that decision to the requester.

Examples of reasonable accommodation that the NGRC or satellite office in collaboration with the RA Coordinator can easily provide within the 30 business-day timeframe include:

- Providing a diabetic employee whose workstation is in an open area with four breaks a day to test his or her blood sugar levels in private.
- Providing an employee with a learning disability with staff meeting agendas in sufficient time for him or her to adequately prepare for the meeting.

Where the NGRC's and satellite offices can provide a particular reasonable accommodation in less than 15 business days, failure to provide such accommodation in a prompt manner may result in a violation of the Rehabilitation Act.

With respect to those requests for reasonable accommodation for which the management official and RA Coordinator requires supporting medical information the 30 business-day deadline will not begin to run unless and until the date RA Coordinator or management official receives the medical information sufficient to substantiate the request for reasonable accommodation.

**Extenuating circumstances:** NGB, NGRCs or satellite offices in coordination with the RA Coordinator or management official may extend the timeframe for acting upon a reasonable accommodation request where there exist circumstances requiring extension that the RA Coordinator could not reasonably have anticipated or avoided. Since all parties involved in the

decision and execution of the RA expects that staff will act as quickly as reasonably possible in processing reasonable accommodation requests, we will endeavor to limit such extenuating circumstances to those that are strictly necessary. The decision maker's mere delay in processing a reasonable accommodation request is **not** an extenuating circumstance.

The following are examples of extenuating circumstances:

- Where it will take the NGRCs or satellite offices longer than *30 business days* to acquire necessary equipment or furniture due to the Federal Acquisition Regulations or CAP requirements.
- Where a vendor is not able to provide necessary equipment or furniture within 30 business days and no alternate vendor is available.
- Where an individual with a disability requires a trial period to test equipment or furniture to ensure its effectiveness.
- Where the reasonable accommodation requires the removal of architectural barriers.

When extenuating circumstances are present, the decision maker must notify the requester as soon as possible of the reason for any delay and the approximate date by which he or she may expect a determination on his or her request for reasonable accommodation. The decision maker should also promptly communicate all further progress on the matter to the requester.

## APPENDIX

### **Reasonable Accommodation Points of Contact:**

#### **NGB Office of Joint Human Capital Management**

**Katherine (Katie) Hauserman**

**National Guard Bureau - Human Resources (NGB-HR)**

**Civilian Management**

**Phone: (703) 607-9934**

**DSN: 327-9934**

**Email: [Katherine.s.hauserman.civ@mail.mil](mailto:Katherine.s.hauserman.civ@mail.mil)**

#### **ANG Office of Human Resources**

**Ms. Sandra Barber**

**National Guard Bureau-Human Resources (HRC)**

**HR Specialist**

**Phone: (586) 239-6831**

**Cell: 313-310-5590**

**[Sandra.d.barber.civ@mail.mil](mailto:Sandra.d.barber.civ@mail.mil)**

#### **NGB-Equity and Inclusion Office**

**Ms. Jaqueline Ray-Morris**

**National Guard Bureau – Equity and Inclusion (NGB-EI)**

**Special Emphasis Program Manager, DPM**

**Phone: (703) 607-1710**

**DSN: 327-1710**

**Email: [Jacqueline.ray-morris.civ@mail.mil](mailto:Jacqueline.ray-morris.civ@mail.mil)**

**Mr. Paul D. Kurle**

**National Guard Bureau - Equity and Inclusion (NGB-EI)**

**Chief, Affirmative Employment Branch**

**Phone: (703) 607-0778**

**DSN: 327-0778**

**Email: [Paul.d.kurle.civ@mail.mil](mailto:Paul.d.kurle.civ@mail.mil)**

**Mr. Charles L. Young**

**National Guard Bureau**

**Chief, Litigation and Employment Law Division**

**Phone: (703) 607-2699**

**DSN: 327-2699**

**[Email: Charles.l.young6.civ@mail.mil](mailto:Charles.l.young6.civ@mail.mil)**

**NGB-EI Affirmative Employment Branch (AEP) Mailbox:** [ng.ncr.ngb-arng.mbx.eeo-aep@mail.mil](mailto:ng.ncr.ngb-arng.mbx.eeo-aep@mail.mil)

### **Additional Information Regarding Reasonable Accommodation**

#### **ADA Disability and Business Technical Assistance Centers (DBTACs)**

Mid-Atlantic Center: (301) 217-0124 (Voice/TTY) <https://adata.org/>

The DBTACs consist of 10 federally funded regional centers that provide information, training, and technical assistance on the ADA. Each center works with local business, disability, governmental, rehabilitation and other professional networks to provide current ADA information and assistance. The DBTACs can make referrals to local sources of expertise in reasonable accommodations.

#### **Department of Defense Computer/Electronic Accommodations Program (CAP)**

(703) 614-8416 (Voice); (571) 384-5629 (Videophone)

<http://www.cap.mil/>

NGB has entered into an Interagency Agreement with the Department of Defense Computer/Electronic Accommodations Program (“CAP”), which provides assistive technology, devices, and services to people with hearing, visual, dexterity, cognitive/learning or communication disabilities. NGB employees are therefore eligible for CAP services. The Office of Equity and Inclusion in collaboration with Human Resources will annually review this directive to ensure it remains consistent with the CAP agreement.

#### **Job Accommodation Network (JAN)**

(800) 526-7234 (Voice); (877) 781-9403 (TTY)

<http://janweb.icdi.wvu.edu/>

Jan is one of several services provided by the U.S. Department of Labor’s Office of Disability Employment Policy. JAN consultants provide information, free-of-charge, about many types of reasonable accommodations and other disability-related issues.

#### **RESNA Technical Assistance Project**

(703) 524-6686 (Voice); (703) 524-6639 (TTY)

<http://www.resna.org/>

The Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) offers certification, continuing education, and professional development guidance regarding the knowledge and practice of rehabilitation and assistive technology.

**Registry of Interpreters for the Deaf**

(703) 838-0030 (Voice); (571) 257-3957 (Videophone)

<http://www.rid.org/>

The Registry of Interpreters for the Deaf offers information on locating and using interpreters and transliteration services.

**U.S. Equal Employment Opportunity Commission (EEOC)**

(800) 669-4000 (Voice); (800) 669-6820 (TTY)

<http://www.eeoc.gov/>

The EEOC's Publication Center (<https://www.eeoc.gov/eeoc/publications/index.cfm>) provides numerous guidance and technical assistance documents on disability discrimination and the ADA, including with respect to federal sector employment specifically.

**ATTACHMENTS**

(NGB-EI will endeavor to revise any form identified below, if possible and as necessary, to accommodate an individual with disabilities.)

Attachment 1: Request for Reasonable Accommodation or Personal Assistance Services Form

Attachment 2: Physicians Medical Assessment Form

Attachment 3: Documentation of Essential Functions Form

Attachment 4: Denial of Reasonable Accommodation Request Form

Attachment 5: Reasonable Accommodation Information Report

**Attachment 1**

**Reasonable Accommodation Request**

**Date of Request:**

**Employee Name:**

**Employee Email:**

**Job Title/Pay Grade:**

**Position Description (#15 on SF-50):**

**Phone Number:**

**Cubicle Number:**

**Supervisor Name:**

**Supervisor Email:**

**Please provide the following information. Use additional pages or provide documentation as needed.**

1. Identify your disability or physical or mental impairment(s) or limitation(s) ("Disability"):
  
2. Explain how your Disability impairs or limits your ability to perform assigned job duties:
  
3. Expected duration of the Disability:
  
4. What specific accommodation(s) are you requesting, if known?
  
5. If you are not sure what accommodation is needed, do you have any suggestions about what options we can explore? If yes, please explain or attach information.
  
6. Has a health care professional recommended a specific accommodation? Please describe or attach documentation:
  
7. Is your accommodation request time sensitive? If yes, please explain.
  
8. If you are requesting a specific accommodation(s), how will that accommodation(s) assist you to perform you job?

9. Have you had any accommodations in the past for this same limitation? If yes, what were they and how did the accommodation(s) help you perform your job?

10. Please provide any additional information that might be useful in processing your accommodation request. We will set up a time to meet to discuss your request.

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Employee Signature and Date

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Supervisor Signature and Date

Log Number (assigned by RA Coordinator):

***Return this form to the RA Coordinator or e-mail to:  
[Jacqueline.ray-morris.civ@mail.mil](mailto:Jacqueline.ray-morris.civ@mail.mil) or [Paul.d.kurle.civ@mail.mil](mailto:Paul.d.kurle.civ@mail.mil)***

**Attachment 2**

**Reasonable Accommodation Request  
Physicians Medical Assessment Form**

**DATE:**

**Employee Name:**

**Employee DOB:**

**COMPLETED FORM MUST BE RETURNED TO EMPLOYER WITHIN 15 DAYS OF THE DATE OF THIS PACKET.**

The above employee has requested a workplace accommodation, to enable the employee to perform the essential functions of his/her position, either because of a disability as either defined under the Americans with Disabilities Act (ADA ), as amended, or state law, or because the employee is pregnant and seeks an accommodation under the applicable state pregnancy accommodation law. The information requested on this form will assist us in making a determination regarding the employee’s request.

**INSTRUCTIONS:** The following form must be completed in detail and signed by the employee’s attending medical provider. Please attach additional pages or records as needed. Do not provide information not related to the employee’s ability to perform his/her job duties. Example: Do not identify an impairment if it does not have an impact on employee’s ability to perform his/her job duties. **IMPORTANT NOTICE**

**REGARDING GINA**

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of employees or their family members. In order to comply with this law, Reed Group is asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

1. Please confirm you have examined the employee and are familiar with the employee’s medical history. (Circle) **Yes No**

2. Is the employee released to return to work full time, full duty without the need for restrictions, limitations, or accommodations? (Circle) **Yes No**

If yes, please state the employee’s full, unrestricted return to work date:

IF NO, PLEASE COMPLETE THE REMAINDER OF THIS FORM.

3. When can the employee return to work with restrictions or an accommodation? [Additional questions regarding restrictions or accommodations below.] \_\_\_\_\_

4. Existence of impairment.

a. Does the employee have a physical or mental impairment(s)? (Circle) **Yes** **No**

b. Is the impairment open and obvious? (Circle) **Yes** **No**

If the employee's impairment is open and obvious, do not answer questions 5-8; rather skip to question 9 and proceed from there.

5. Please list impairment(s), diagnosis and prognosis

**Note: A physical or mental impairment under the ADA is:**

Any physiological disorder, condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: Neurological, musculoskeletal, special sense organs, respiratory (including speech organs), cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine; or

Any mental or psychological disorder, such as an intellectual disability, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

The disorder or condition is considered:

In its active state, even if presently in remission. (Examples: epilepsy, MS, asthma, cancer, bipolar disorder.)

Without regard to the effects of mitigating measures such as prostheses, medication, etc., except ordinary eyeglasses.

With consideration of the negative effects of treatment such as medication or other measures.

\*The definition of a disability may differ slightly under state law.

6. Limitations on major life activities. If the answer to #4(a), is yes, does the employee's impairment substantially limit one or more major life activities? (Circle) **Yes** **No**

Note: Whether an impairment substantially limits the ability of an individual to perform a major life activity is determined:

As compared to most people in the general population; and

Does not need to prevent, or significantly or severely restrict, the individual from performing a major life activity – the impairment only needs to “substantially limit” the employee's ability to perform the major life activity.

7. Limitations on major life activities (cont.). If the answer to #6 is yes, which major life activity(s) is/are affected?

**Check all major life activities that both (a) are affected by the employee’s impairment(s) and (b) restrict or limit the employee’s ability to perform the employee’s job duties.**

**Major life activities – general life activities:**

<input type="checkbox"/> Bending	<input type="checkbox"/> Learning	<input type="checkbox"/> Sleeping
<input type="checkbox"/> Breathing	<input type="checkbox"/> Lifting	<input type="checkbox"/> Speaking
<input type="checkbox"/> Caring for self	<input type="checkbox"/> Performing manual tasks	<input type="checkbox"/> Standing
<input type="checkbox"/> Concentrating	<input type="checkbox"/> Reaching	<input type="checkbox"/> Thinking
<input type="checkbox"/> Eating	<input type="checkbox"/> Reading	<input type="checkbox"/> Walking
<input type="checkbox"/> Hearing	<input type="checkbox"/> Seeing	<input type="checkbox"/> Working
<input type="checkbox"/> Interacting with others	<input type="checkbox"/> Sitting	<input type="checkbox"/> Other(s)
(describe):		

**Major life activities – operation of major bodily functions:**

<input type="checkbox"/> Bladder	<input type="checkbox"/> Genitourinary	<input type="checkbox"/> Operation of an organ
<input type="checkbox"/> Bowels	<input type="checkbox"/> Hemic	<input type="checkbox"/> Reproductive
<input type="checkbox"/> Brain	<input type="checkbox"/> Immune	<input type="checkbox"/> Respiratory
<input type="checkbox"/> Cardio-vascular	<input type="checkbox"/> Lymphatic	<input type="checkbox"/> Sensory organs & skin
<input type="checkbox"/> Circulatory	<input type="checkbox"/> Musculoskeletal	<input type="checkbox"/> Endocrine
<input type="checkbox"/> Digestive	<input type="checkbox"/> Neurological	<input type="checkbox"/> Normal cell growth
<input type="checkbox"/> Other(s) Describe:		

8. Commencement of impairment(s). For the impairments identified above, when did the employee’s impairment(s) commence? If there is more than one impairment, please specify the start date for each:

9. Performance of essential job functions. Does the employee’s impairment(s) limit his/her ability to perform the essential functions of the employee’s position (as defined in the attached job description) without any accommodation? (Circle) **Yes No**

If the answer is yes, please:

a. Identify which essential function(s) the employee is unable to perform without an accommodation:

b. Describe the manner in which the employee’s ability to perform each essential function is limited:

10. Accommodation(s). Please describe:

Note: Reasonable accommodations may include such things as a modified work schedule, provision of special equipment, workplace accessibility modifications, shifting of non-essential duties of the employee's position, and extended leave of absence to allow time for recovery, therapy, training, or other disability-related needs.

a. How will the accommodation(s) assist the employee in performing the essential job functions?

b. Duration: For how long do you anticipate the employee will need the identified accommodation(s) to perform the essential job functions?

\_\_\_\_\_ (circle one) days/weeks/months/years; or permanent

NOTE: You must provide your best medical judgment, based on current information, as to the length of time the employee will need an accommodation to perform his/her essential job functions.

12. Additional information. Are you aware of any other information that the employer should consider in assessing whether the employee can perform the essential job functions with or without accommodation?  
(Circle) **Yes** **No**

If yes, please describe below:

Provider Name (print):

Provider Signature:

Provider Practice/Specialty:

Provider ID#:

Provider Phone Number:

Provider Address:

Date:

### Attachment 3

#### Documentation of Essential Functions Form

Name of Employee:	Title, Series, Grade of Position:
Directorate/Division/Branch:	
<b>To be completed by Supervisor</b>	<b>To be completed by health care professional</b>
Please identify the essential functions of the position in the space below. Please include any requirements needed to perform the essential functions of the position (e.g. physical requirements).	Please document any restrictions or limitations that may impact the employee's ability to perform the essential functions of the position listed in the left column. Also, include any reasonable accommodations that may allow the individual to perform the essential functions of the position.
Essential Function #1	
Essential Function #2	
Essential Function #3	
Essential Function #4	
Supervisors signature and Date	Healthcare Provider Name, Signature and Date

## Attachment 4

### Denial of Reasonable Accommodation Request Form

Log Number \_\_\_\_\_

1. Individual Requesting Reasonable Accommodation \_\_\_\_\_

2. Type(s) of accommodation requested:

3. Request for accommodation denied because (may check more than one box):

\_\_\_\_\_ Accommodation would cause undue hardship

\_\_\_\_\_ Medical documentation inadequate

\_\_\_\_\_ Accommodation would require removal of one or more essential job functions

\_\_\_\_\_ Other (Please Identify) \_\_\_\_\_

4. Detailed Reason(s) for the denial of a requested accommodation (Must be specific, e.g., why accommodation is ineffective or causes undue hardship):

5. If the individual proposed one type of reasonable accommodation, which is being denied, but rejected an offer of a different type of reasonable accommodation, explain both the reasons for denial of the requested accommodation and why the chosen accommodation is effective.

6. An individual who disagrees with the denial of an accommodation request is encouraged to initiate an alternative dispute resolution (ADR) through any applicable ADR process established by the Army.

7. If the individual wishes to file an EEO complaint, or pursue Merit Systems Protection Board (MSPB) appeal and union grievance procedures, she/he must take the following steps. The time limits for these steps apply whether or not the individual has initiated ADR:

- For an EEO complaint pursuant to 29 C.F.R. 1614, contact **the Complaint Management Branch, NGB-EI at (703) 601-6752 within 45 days from the date of this notice of denial of accommodation request; or**
- For a collective bargaining claim, file a written grievance in accordance with the provisions of the **Collective Bargaining Agreement to JHCM at (703) 607-5946**
- Initiate an appeal to the **MSPB within 30 days of an appealable adverse action as defined in 5 C.F.R. § 1201.3 to JHCM at (703) 607-5946.**

\_\_\_\_\_  
Printed Name, Signature and Date of Deciding Official

**Denial of Reasonable Accommodation Request Form cont.**

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Printed Name, Signature and Date of Deciding Official

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Employee Signature and Date Acknowledging Receipt

## Attachment 5

### REASONABLE ACCOMMODATION INFORMATION REPORT

To be completed by manager/official who processed the accommodation request. Submit to local Disabilities Program Manager (EEO Office). (Use additional sheets if necessary)

1. Request for accommodation:  (Check one)  
Approved  
 Denied (Attach copy of the written denial memo sent to individual.)
2. Date reasonable accommodation requested:
3. Who received the request:
4. Date reasonable accommodation request referred to decision maker (i.e., supervisor, Office Director):
5. Name and position of Decision Maker:
6. Date request approved or denied:
7. Date reasonable accommodation provided (it different from date approved):
8. If time frames outlined in the Reasonable Accommodation Procedures were not met, please explain why:
9. Job held or desired by individual requesting reasonable accommodation (include occupational series, grade level or equivalent NSPS information and office):
10. Reasonable accommodation needed for:  
 (check one) Application Process  
 Performing Job Functions or Accessing the Work Environment  
 Accessing a Benefit or Privilege of Employment (e.g., attending a training program)
11. Type(s) of accommodation requested (e.g., adaptive equipment, staff assistant, removal of architectural barrier):
12. Type(s) of reasonable accommodation provided (if different from what was requested):
13. From what organization was adaptive equipment obtained?
14. Was medical information required to process this request? If yes, explain why.
15. Sources of technical assistance, if any consulted in trying to identify possible reasonable accommodations (e.g., Job Accommodation Network, Computer/Electronic Accommodations Program, disability organization, Disability Program Manager).

**Name:** \_\_\_\_\_

**Phone: Email Address:** \_\_\_\_\_