

## Housing and Dining Accommodation Request Form

Revised: July 2021

### Student Information - Please Print Clearly

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_  
University ID #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
ISU E-Mail: \_\_\_\_\_ On-Campus Assignment (if any): \_\_\_\_\_

### ACCOMMODATION PROCESS

**Step 1. Contract for Housing** - Your accommodation is impacted by your contract date. On the contract there is an accommodation question. Please answer "yes" to this question. Don't assume your needs will be met based only on your contract preferences. Once your assignment is made, we may not be able to change it.

**Step 2. Register with Student Accessibility Services (SAS)** - Only SAS staff are trained to evaluate accommodation requests, so you must register with this office.

**Step 3. Submit This Form** - You will need to complete a Housing Accommodation Request Form and submit it to SAS along with the required documentation. If you don't complete this step prior to **May 1** for fall or **December 1** for spring. If needed, you may be contacted for clarification or additional information. To avoid delays, please make sure you check your ISU email regularly.

**Step 4. Your Request is Reviewed** - Once you have completed the above steps, your request will be evaluated by SAS staff who will make a recommendation regarding your assignment. There may be a difference between what you want / ask for and what the law and medical opinion tells us you need. Approval of all requests is at the discretion of Iowa State University.

### Request Information - Please answer ALL questions.

1. I am requesting this accommodation to begin (date or semester): \_\_\_\_\_

2. This request is based upon a permanent / reoccurring condition and I will need to be accommodated as long as I live on-campus.  
 **Yes** - The DOR will make my initial assignment. In future years, I will participate in Recontracting to select my assignment.  **No** - This condition is not anticipated to extend beyond the current academic year. If this changes, I will contact the DOR.

3. This accommodation involves (check all that apply):  Room Type / Amenities  Assistance Animal \*  Dining Services \*\*

4. I am requesting the following accommodation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Statement of Agreement - By submitting this form I am agreeing that:

- I have reviewed and I understand the information on this form and on the following websites:
  - DOR web site (<https://www.housing.iastate.edu/contracts-and-assignments/accommodation-requests/>),
  - ISU Dining web site (<https://www.dining.iastate.edu/nutrition/accommodations/>),
  - SAS website (<http://www.sas.dso.iastate.edu/student/housing>).
- I am giving DOR, ISU Dining, and SAS permission to discuss this form, my documentation, and other information pertinent to my accommodation request.
- My request will only be considered once appropriate, supporting documentation is received and will then be evaluated on the merits of the documentation provided. Documentation guidelines can be found on the SAS website, <http://www.sas.dso.iastate.edu/student/housing>.
- \* If this is an **assistance animal** request, I am required to complete an **Animals in Residence Form**, along with appropriate documentation, in addition to this accommodation request. Even if my request is approved by SAS, permission to bring my animal to campus will not be given until the process indicated on this website is complete. <https://www.housing.iastate.edu/contracts-and-assignments/accommodation-requests/animals-in-residence/>
- \*\* If this is a **dining accommodation** request, I am required to meet with the ISU Dining dietician to discuss my needs. Meal Plan exemptions are approved only if ISU Dining is unable to customize a dining plan the meets my documented medical needs.
- I am aware housing accommodations are impacted by when I contract for housing. If I submit my contract late my requested accommodation may not be possible because appropriate space is no longer available.
- I am aware that this request is for a housing accommodation that first and foremost meets my documented needs. Building and room type preferences listed on my housing contract will be considered and honored if possible, but an assignment within my preferences is not guaranteed.
- I am aware that this request applies only to my housing and does not apply to my roommate or requested roommate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian Signature (if student is under 18): \_\_\_\_\_ Date: \_\_\_\_\_