KANSAS STATE UNIVERSITY | Student Access Center

UNIVERSITY HOUSING ESA ACCOMMODATION VERIFICATION FORM

Kansas State University provides reasonable accommodations to persons with disabilities who have a verifiable need for the reasonable accommodation because of a disability. A reasonable accommodation is an exception to the usual rules or policies that a person with a disability needs because of their disability to have an equal opportunity to use and enjoy University housing.

Please answer the following questions. The requestor portion is to be completed by the student. The third-party verification portion is to be completed by the student's health care provider.

Requestor Portion

Name of Person Requesting Accommodations (Print): _____

Specific Accommodation being requested:

_____

_____

_____

_____

_____

_____

Signature of Person Requesting the Accommodation: _____

202 Holton Hall, Manhattan, KS 66506-1311 | (785) 532-6441 | video: (785) 370-0431 | fax: (785) 532-6457 | accesscenter@k-state.edu

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Third-Party Verification Portion

The signature above authorizes the verifier to provide answers to the questions below to the best of their knowledge of this resident.

1. Are you this individuals current and established health care provider (i.e. working with the individual to diagnose or provide ongoing treatment)? (Yes or no)_____

For purposes of this verification, disability is defined as a physical or mental impairment that substantially limits one or more major life activities. Under this definition, an impairment is a disability if it substantially limits the ability of the resident to perform a major life activity as compared to most people in the general population.

2. Does this person have a disability under this definition? (Yes or no)_____

Please answer the following questions in detail. Less than two sentences is not typically sufficient.

3. Please identify the resident's impairment(s) and describe how each impairment substantially limits his/her ability to perform a major life activity as compared to most people in the general population:

_____

_____

_____

_____

_____

4. Please explain how the accommodation is necessary for the resident to use and enjoy housing as compared to a person without a disability (e.g. if the person is requesting an animal, what benefits does the animal provide to this person that it would not provide to a person without a disability who has a household pet).

_____

_____

_____

_____

_____

5. Have you and the individual discussed the responsibilities associated with properly caring for this ESA while engaged in typical college activities and residing in campus housing? (Yes or no)_____

6. Please identify any other accommodation that may be equally effective in allowing the resident to use and enjoy University housing.

_____

_____

_____

_____

_____

Name and Credentials of Verifier (print): _____

License Number:_____

Signature of Verifier:_____

Date Completed:_____

Address: _____

Telephone:_____

When completed, return this form to:

Kansas State University
Student Access Center
202 Holton Hall
Manhattan, Kansas 66506-1311
Phone: (785) 532-6441
Fax: (785) 532-6457
accesscenter@ksu.edu