TITLE II AMERICANS WITH DISABILITIES ACT ACCOMMODATION FORM

Please return this form as far in advance of your Court proceeding as possible, but preferably at least seven (7) days before your scheduled Court appearance or activity. Please submit this Request Form to the Common Pleas Court, Juvenile and Probate Divisions, Ronda Muehlfeld Court Administrator, One Courthouse Square, Bryan, OH 43506 or fax to (419) 636-5405 or email to ronda.muehlfeld@wmsco.org.

Date request submitted:

Name of person needing accommodation: _____

Are you (please check one of the following):

_____ Defendant _____ Plaintiff _____Litigant/Party _____ Witness _____ Juror
_____ Victim _____ Attorney _____ Other (specify): _____

Contact information for person needing accommodation:

Address: _____

Phone: _____ Email: _____

Person making this request (if other than person needing the accommodation):

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship to person needing the accommodation: _____

Case information (if applicable):

Case Number: _____ Judge/Magistrate: _____

Date/time accommodation needed: _____

Accommodation requested: _____

_____

_____

Nature of disability that necessitates accommodation: _____

_____

_____

_____

TITLE II AMERICANS WITH DISABILITIES ACCOMMODATION FORM
To Be Completed by Court Personnel Only

Date request was received: _____ Received by: _____

Was request complete: ____ Yes ____ No If no, what additional information is needed:

_____

_____

Additional information request made on: _____ By: _____

Accommodation granted: ____ Yes ____ No

Type of accommodation granted: _____

_____

_____

If accommodation not granted, cite reason for denial:

[ ] Based on the information provided, it appears the person does not have a disability as defined by the ADA

[ ] Requested accommodation does not directly correlate to functional limitations

[ ] Request relates to service, program, or activity outside the Court system (transportation, legal representation, mental health counseling, parenting course, etc.)

[ ] Request for an aid/service the Courts cannot administratively grant as an accommodation pursuant to Title II of the ADA (official transcript, extension of time, etc.)

[ ] Requested accommodation would result in an undue fiscal or administrative burden to the Court

[ ] Requested accommodation would result in a fundamental alteration

[ ] Other (please specify): _____

_____

_____

Court staff responding to request: _____

Date person notified of determination: _____