

### Request for Reasonable Accommodation in University Housing

#### **PROCESS INFORMATION**

Penn State provides a climate of equal opportunity in all programs, activities, and services, and is in full compliance with the Americans with Disabilities Act (ADA) as amended and Section 504 of the Rehabilitation Act of 1973. University Housing provides accessible housing for a student with documented disability as defined by applicable laws. The student must provide documentation from a licensed, qualified healthcare professional that substantiates that the student has a physical or mental impairment that substantially limits a major life activity and that the requested accommodation is directly related to such impairment and is necessary to afford the student equal access. Presence of a diagnosis that constitutes a disability is not always sufficient for determination of approval for a housing accommodation. Medical and psychological conditions vary in symptom intensity and severity; those conditions that represent a higher symptom severity and functional impairments are prioritized. Requests for a Service Animal or an Emotional Support Animal should follow the process outlined at https://liveon.psu.edu/accommodation-requests.

The **Request for Reasonable Accommodation in Housing** form will be reviewed by a healthcare professional at University Health Services (UHS), Counseling and Psychological Services (CAPS), and/or Student Disability Resources (SDR), who will make the determination as to the validity of the request. **The student will be informed of the final determination by email within 1-2 weeks after the initial submission of paperwork**.

A student may submit the *Request for Reasonable Accommodation in Housing* form once a student meets one of the following criteria: the student has accepted a HFS Contract; the student has Requested Housing during the LiveOn Housing Process; the student has added their name to the "On-Campus Housing" Waitlist in eLiving; or the student is eligible to receive a HFS Contract based on their admission status and campus.

The Request for Reasonable Accommodation in Housing may be submitted at any time, but for HFS Contract preferences (housing area, roommate) to be considered for assignment, the following deadlines apply:

Summer Session: June 1 Fall Semester: June 15 Spring Semester: December 1

The determination will supersede any preferences that a student indicates on the HFS Contract.

If the *Request for Reasonable Accommodation for University Housing* is received *after* room assignments are posted, the University reserves the right to reassign the student to a space that meets the approved determination. Preferences listed on the HFS Contract may not be considered.

- Room changes will only accommodate the student requiring the accommodation, and **not** any requested roommate(s).
- If a determination is made for assignment to a room type that is not immediately available, the student will be given priority for reassignment to that room type as soon as a vacancy exists.

The accommodation takes effect immediately once the determination is processed, based on space available. Paperwork cannot be submitted for future semesters without addressing the current room assignment, and a request to hold a reassignment will not be honored.

#### **Room Assignment Changes**

Once a student has been assigned to a room that meets the student's accommodation, the student may be limited in being reassigned to another room.

#### **Room Rate Adjustments**

Students will be informed if they are eligible for a room rate adjustment and if there are different options available that may have a different room rate associated with the room assignment.

#### **Accommodations for Air Conditioning at University Park**

Rooms that offer air conditioning have been established throughout the different housing areas on campus, including rooms in traditional residence halls with window AC units. An approved accommodation for air conditioning does not mean that a student is necessarily assigned to a 'renovated residence hall'.

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STUDENT INFORMATION – completed by st	udent	
Student Name	PSU ID:	
Penn State Access Account	Campus:	
Home Address		
HEALTHCARE PROVIDER ☐ I authorize Penn State to receive information my condition(s) with the appropriate and quality	on from the provider below and authorize my provider to discutive fied university staff on an as-needed basis.	uss
Provider Name		
Address		
City	State Zip	
Phone Number		
Student Signature	Date	
my housing preferences and roommate.  If my room assignment has been posted that meets my accommodation. It may roommate.  If I am interested in a room change do accommodate my documented and verial I understand once a determination is maccommodation cannot be held for future.  I understand my room assignment may	ed on eLiving, I understand that I may be reassigned to a rocy be in a different housing option, area, and/or with a different luring the contracted period, I will be limited to rooms that derified accommodation.  Inade, my room assignment will be updated immediately, and the ure semesters.  If y or may not include a room rate discount, which may be basing preferences, and I will be informed of housing options as	can the
Housing form, and room assignment with the	ical information, <i>Request for Reasonable Accommodation in</i> following person on my behalf, as well as any individual who earn more at <a href="https://www.registrar.psu.edu/parents/">https://www.registrar.psu.edu/parents/</a> .	
Name	Phone Number	
Relationship to student		
Student Signature	Date	

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STU	UDENT HEALTHCARE SECTION – com	pleted by healthcare provider
Stu	tudent Name	PSU ID
University of the second secon	iversity Housing, the licensed clinical prof	pest meet the student's need for a reasonable accommodation in essional or healthcare provider who is familiar with the history and all or psychological condition(s) should provide specific diagnostic on cannot be the student or a relative.
spec	ecific symptoms, severity/duration of syn	stions with detailed information - include relevant diagnoses, and how symptoms interfere with the student's current onal related information may be attached.
1.	. State the specific housing accommod Housing.	odation(s) that you believe this student requires in University
2.	accommodation request. Be specific	cal or psychological condition necessitates/warrants this with diagnoses that apply to the student, as well as specific warrant the accommodation being requested.
3.	3. When was the last appointment the stu	ident attended with you?
4.		•
5.		• •

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# **HEALTHCARE PROVIDER INFORMATION – completed by healthcare provider** ☐ I am verifying that the named student information is correct, that the student is a patient that I have been treating, and that I am not a relative of the student. **Provider Name** License Number State Provider Degree Address City State Zip Phone Number Date Provider Signature Please explain your qualifications to provide a recommendation for a housing accommodation for this student:

#### COMPLETED FORM SUBMISSION

The *Request for Reasonable Accommodation in Housing* may be submitted at any time, but for housing preferences to be considered for when a room assignment is processed, the following deadlines apply:

Summer Session: June 1 Fall Semester: June 15 Spring Semester: December 1

The completed *Request for Reasonable Accommodation in Housing* should be submitted to the Housing Assignment Office, regardless of the student's campus of attendance:

## **Housing Assignment Office**

455 Bigler Road 814-865-7501
201 Johnston Commons, East Halls 814-863-8364 fax
University Park, PA 16802 LiveOn@psu.edu

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