

Saint Elizabeth University

Office of Accessibility Services and Residence Life

Special Housing Request Jot Form

Office of Accessibility Services

Phone: (973) 290-4261

Email: accessibility@stev.edu

Please read this entire form. Students may request special housing if they have a qualified medical condition or psychological/medical/psychiatric/physical disability as defined by the Americans with Disabilities Act Amendments Act (2008). The initial request for housing accommodations is to be made with the Accessibility Services Coordinator by filling out this form. After you submit your form, Accessibility Services will reach out to you with next steps.

Please attach the completed Special Housing Request Physician Form. [Click here for Special Housing Request Physician Form](#) and any other supporting documentation from your medical provider supporting this request.

A completed request consists of this form and any additional materials/documentation that includes particular details. **The provider may not be someone with whom you have a significant emotional relationship** (e.g. Spouse, parent, sibling, or other relative).

Once your complete request is received, the Accessibility Services Coordinator will work with the Housing Committee to determine your needs and availability. **We may request additional information from your provider** who is primarily responsible for treating your particular condition.

Students Please Note: All requests will be reviewed on a case-by-case basis and documentation of a specific need or disability does not guarantee that your request will be approved. Assignment to a specific residence or roommate cannot be guaranteed. All students approved for special request housing are not eligible to participate in the room selection process but will receive a housing assignment with the approved accommodations. A student who requests accessibility housing accommodations through this process has 5 business days to accept or decline the accommodation from the date the accommodation is offered. **(It is the responsibility of the student to check email for communication about this request.)**

* New students must participate in the Housing Deposit and Housing Application processes while they are going through the accommodation process, to be eligible for housing.

Special accommodations are extremely limited and thoroughly screened. After the Housing Committee has reviewed the request, they will make a recommendation to the Office of Residential Life. The approval and/or denial will be communicated in writing via email by the Office of Accessibility Services. **(It is the responsibility of the student to check email for communication about this request)**. For those students with a documented disability who have been approved for a single room as an accommodation, the single room housing rates will be waived and the student will be charged based on a double occupancy room.

New students/First time request deadline: July 1st

Returning students (with an assigned room): Do not Fill out this form. Please fill out the special housing renewal form.

Student Information:

*Last Name:

*First Name:

*SEU ID #:

*SEU email:

*Home address:

*Current Housing Building/Assignment:

*Room Number:

*Cell Phone #:

*1. Please check to indicate the nature of the special housing request:

Medical _____ Food Related _____ Mental Health _____

Other _____ (Please Specify)

*2. What specific housing accommodation are you requesting?

*3. What is your diagnosis? _____

*4. How does the stated request relate to your condition? _____

*5. What major life activity(ies) bodily function(s) is/are substantially limited by your condition?

*5. How will the requested housing accommodation address your limitations described above?

*Student Signature: _____ *Date: _____

Documentation:

Please attach the completed Special Housing Physician Form and any other supporting documentation supporting this request.

