



City of Peoria
Community Services Department
Request for Accommodation
Informational Packet

Process:

- Review Applicant Letter
- Complete "Request for Accommodation" form if eligibility requirements are met.
- Attach support documentation from medical or school personnel to the "Request for Accommodation."
- Return to the appropriate Recreation Supervisor listed below.

Kathleen Kresl -773-7108
AM/PM
Summer Recreation Programs

Vince Gray - 773-7129
Youth and Adult Sports

Office
Community Services Department
8401 W. Monroe

Jackie Stanley - 773-7436
Senior Adult, Adaptive Programs
Special Interest Classes (SIC)

Andrea Treganza - 773-7192
Special Interest Classes (SIC)

Office
Community Center
8335 W. Jefferson

Mailing address (for all programs):

City of Peoria,
8401 W. Monroe,
Peoria, AZ 85345



Request for Accommodation

for services through

The City of Peoria Community Services Department

Dear Applicant,

The Community Services Department is pleased to provide you with a Request for Accommodation form as part of its commitment to the Americans with Disabilities Act (ADA). The Act was designed to remove barriers to full participation in public programs by individuals with disabilities.

Successful accommodation requires careful planning and coordination. The Request for Accommodation form is designed to help the Community Services Department's ADA Review Committee evaluate the needs of the participant and plan accordingly. It is advisable that forms be **completed at least two weeks prior to the start of an activity or program**, as some requests can take up to a week to review and another week or more to arrange. A member of the Committee will be in contact with you within 2 weeks after applying for an accommodation.

Commonly Asked Questions:

What is a reasonable accommodation?

Accommodation can take many forms. Each accommodation is on a case-by-case basis and may include, but is not limited to: changing program procedures, providing auxiliary aids, making accessibility modifications, staff training and technical assistance. The ADA Review Committee will determine the degree of accommodation needed for each participant and will monitor progress throughout participation in the program or activity, providing adjustments when the need arises.

What if I am not sure about the most appropriate accommodation?

The Department's Adaptive Recreation Program provides year-round activities for individuals with disabilities. Youth programs provide accommodations for those who meet the criteria. Staff from each Program is available to discuss any questions or concerns as they relate to the accommodation. The number for the Adaptive Recreation Program and Special Interest Classes is 623-773-7436. AM/PM, Summer Recreation, Summer Camp and Sports questions can be directed to 623-773-7108.

What documentation should I provide?

There are a number of documents that can accompany a request. These will be utilized in verifying a disability and assisting the ADA Review Committee in planning an accommodation. A few of the forms that can be used when applying for an accommodation are; a child's I.E.P., medical records and/or doctor's diagnosis, provided that enough information is included to facilitate an accommodation. This documentation will be evaluated to determine if there is a need for accommodation and to what degree it is needed.

How long is the Request for Accommodation good for?

The Request for Accommodation would need to be completed prior to admission into a program. Accommodations may vary from activity to activity, so separate requests need to be done for separate activities. Accommodations can be modified over time to meet the needs of the participant. If a Request for Accommodation was completed for the AM/PM program, it would be in effect throughout the school year and would need to be re-submitted the following school year, if an accommodation was still needed. As mentioned before, requests should be submitted at least two weeks prior to the beginning of a program.

What services are not provided under the ADA?

The ADA identifies areas that are not considered a reasonable accommodation and are exempt under the ADA. Department staff do not provide services of daily living that include feeding, dressing, and toileting. **Serious behaviors that can jeopardize the health and safety of others or are a serious disruption to the program (i.e. abusive language, hitting, kicking) can be grounds for denial or removal from a program.** The Department will assist in dispensing most medications during program hours, however clear instructions must be provided and medication should be sent in the original prescription bottle. Staff does not administer injections of any kind.

Program Policies and Procedures

Policies and procedures that relate to participation criteria including, but not limited to, age, residency, or grade level are not altered as an accommodation. Other policies and procedures can be reviewed and modified as needed to allow for successful participation in a program.

If you have additional questions regarding accommodation, please feel free to contact the **Community Services Department at 623-773-7137 or the Adaptive Recreation Program at 623-773-7436.**



REQUEST FOR ACCOMODATION

City of Peoria
Community Service Department
Recreation Division

The city of Peoria endeavors to make all of its programs accessible to individuals with disabilities in accordance with The Americans with Disabilities Act. In order to better serve citizens who require accommodation, this form needs to be completed as thoroughly as possible prior to program registration.

Child's Name: _____ D.O.B.: ___/___/___ Age: _____

Current School Attending: _____

Parent Name Mother: _____ Cell Phone: (____) _____ - _____

(If a minor or if Parent has guardianship)

Parent Name: Father - _____ Cell Phone: (____) _____ - _____

Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____

Check Program Desired:	Start Date:
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- Adaptive Recreation
- AM/PM Program - Name of School _____
- Summer Camp – Site Location _____
- Tiny Tots - Site Location _____
- Summer Recreation, Grades 1-5 - Site Location _____
- STEP OUT- Site Location _____
- Sports - Name of Sport _____
- Aquatics – Name of Program or date of Lesson _____
- SIC – Name of Class _____

Complete questions 1- 4 fully with as much detailed information as possible.

Documentation of a Disability from your Physician, Health Care professional or School District is **REQUIRED FOR ACCOMODATIONS**. Provide as much information as possible to allow the staff who is or are a Certified Therapeutic Recreational Specialist to properly assess the level of accommodation needed. Attach additional documentation, such as, the child's I.E.P., medical records and/or a doctor's diagnosis to the request. Please do not use abbreviations.

1. Name of Disability: _____

2. Type of Documentation providing: _____

3. Describe the desired accommodation you are requesting: _____

4. Participation Concerns/Special needs: _____

(Please cont. on next page)

