Living on campus can be a new and exciting experience for college students. Residential learning environments are important parts of VCU’s programs, especially for freshmen students. VCU is committed to providing meaningful residential experiences for all students.

Students requiring housing accommodations based on a medical, psychological, physical, or disability-related impairment may request any special arrangements/accommodations through the Office of Disability Support Services. To aid in this process, a request must include:

1. Completion of the VCU Disability Support Services Housing Accommodation Request Form. (Please note: this form does not take the place of the VCU Residential Life & Housing Application.)
2. Written documentation of the impairment/disability that forms the basis of the request.

The VCU Housing Accommodation Request Form and documentation information must be received by the Office of Disability Support Services (DSS) by:

- May 1 for first year students and new transfers
- January 31 for continuing/returning students

**Documentation:** All documentation should be on letterhead, typed, dated, signed, and otherwise legible and must include the following:

1. Medical or clinical diagnosis of the disability/impairment by a licensed professional in the appropriate area of specialization. Please include the most recent evaluation.
2. The diagnostic criteria or name of the assessment instruments used to determine the diagnosis.
3. A clear definition of the impact of (or limitations imposed by) the impairment/disability on the student’s housing needs.
4. Treatments, medications, devices, or services currently prescribed or used to minimize the impact of the impairment/disability.
5. The expected duration, stability or progression of the impairment/disability (mild/moderate/severe).
6. The credentials of the diagnosing professional.

In addition to the basic documentation for an impairment/disability listed above, recommendations for accommodations from the treating professional are welcome and will be given consideration in evaluating a request. Any such recommendations should:

1. Provide a clear description of the recommended housing configuration.
2. Justify the recommended configuration as it relates to the impairment/disability.
3. Describe possible alternatives to the recommended configuration.
4. Provide a statement of the level of need for (or the consequences of not receiving) the recommended configuration.
VCU Housing Accommodation Request Form

This form does not replace the VCU Residential Life and Housing Application.

- Students requesting housing accommodations through the Office of Disability Support Services must complete all other requirements and procedures for university housing.
- Documentation of the student’s impairment/disability must accompany this request form. Students may fax, email, mail, or hand deliver their documentation and Housing Accommodation Request Form to the Office of Disability Support Services.
- All requests will be prioritized in the order in which they are received. Requests will be reviewed and students will be notified by mail or email regarding the outcome of their request. The housing accommodations committee will make every effort to notify students regarding the outcome of their request by, at most, 6 weeks after the student submitted their request.
- Special housing requests deadlines are:
  - May 1 for first year students and new transfers
  - January 31 for continuing/returning students.
- Every effort will be made to accommodate approved requests received by the deadline dates.
- Any applications received after the deadline dates will be reviewed based upon housing availability.
- All housing requests are evaluated on a case by case basis.

Name ________________________________________ Date __________________________
First Last Middle Initial

VCU Email Address _____________________________________________________________

Phone Number ___________________________ Student ID # __________________________

Student status for year applied (freshman, sophomore, etc.) __________________________

Please specify your medical, psychological, physical, and/or disability-related impairment (please check all that apply).

☐ ADHD
☐ Blind/Visual Impairment
☐ Deaf/ Hearing Impairment
☐ Health Impairment (please specify) ______________________________
☐ Learning Disability
☐ Mental Health Impairment (please specify) ______________________________
☐ Physical/ Mobility Impairment
☐ Speech/ Language Impairment
☐ TBI
☐ Other (please specify) ______________________________

Attach documentation from treating professional of above noted items to this form.
Specify whether your condition is: □ Temporary or □ Permanent

What specific housing accommodation or configuration are you requesting (please check all that apply)?

□ Single room
□ Private/semi private bathroom
□ Room on the ground floor
□ Roll in shower
□ Shower bars
□ Full time personal attendant living in residence hall (students are responsible for employing and supervising their personal attendants)
□ Part time personal attendant in residence hall (students are responsible for employing and supervising their personal attendants)
□ Comfort animal living in residence hall (students are responsible for obtaining and caring for their comfort animals.) Students must specify the type of animal:

_______________________________________________________________
□ Service animal (students are not required to request as an accommodation. However, your request helps us plan for your housing experience.)

□ Visual emergency signals
□ Double bed
□ Other (please specify)__________________________________________

How does the request(s) serve to accommodate your disability or impairment?
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

Please provide additional alternatives if the requested accommodation is unavailable.

Please Note: The University does not provide students with personal devices or assistance for personal use, including but not limited to: wheelchairs, eye glasses, hearing aids, transportation, special classes, service animals, readers, or personal assistance for eating, dressing, or other personal services or readers for personal use.

___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

Are you requesting additional (academic) accommodations besides housing? □ Yes □ No

If yes, please visit the DSS website at http://www.students.vcu.edu/dss/ to download the student intake packet. Please return your completed packet to DSS.

Student Signature ____________________________ Date ________________
For Office Only

APPROVED: □ YES □ NO

Attach: Letter of Approval or Denial

Director, DSS ____________________________________________ Date ______________

Associate Director/Director of Housing __________________________ Date ______________

Comments or additional conditions: __________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

VCU is an EEO/AA institution. DSS1516-01