

WORKPLACE ACCOMMODATION REQUEST FORM

Employees with disabilities may require adjustments to their workplace and responsibilities to accommodate their individual needs.

If you require an accommodation, please complete this form and submit it to the Human Resources Department. Human Resources and/or your Supervisor contact you to discuss your plan.

Request for Individualized Workplace Accommodation Plan	
<input type="checkbox"/> I request an individualized workplace accommodation plan.	
Employee Information (full name)	Phone Number/Extension
Work Location/Department	Manager or Supervisor

Would you require assistance during an emergency? Yes No

This information is collected and retained in accordance with the *Accessibility for Ontarians with Disabilities Act, 2005* and its Integrated Accessibility Standards, *Ontario Regulation 191/11*.

Please return this form to Human Resources at the Civic Centre or fax to 519-364-6456.