

# DOCUMENTATION FOR ACCOMMODATION NEEDS



1011 Student Activities Building  
515 East Jefferson Street  
Ann Arbor, MI 48109-1316  
Telephone: 734-763-3164  
Fax: 734-764-6806  
E-Mail: housing@umich.edu  
Web site: www.housing.umich.edu

## Student Information

Name: \_\_\_\_\_ UM ID Number: \_\_\_\_\_  
(Last, First, M.I.)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
(include area code)

Note regarding air conditioners: We cannot guarantee installation prior to your arrival for Fall Term if valid request is received later than July 15.

**Certifying Professional** (must specialize in the area of the condition or disability and not be a friend of the family or related to the student)

Name: \_\_\_\_\_

Specialty: \_\_\_\_\_ Phone number: \_\_\_\_\_  
(include area code)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

License/Certification Number and State of Licensure: \_\_\_\_\_

Date of initial contact with student: \_\_\_\_\_ Last Contact: \_\_\_\_\_

**Please give the diagnosis, functional limitation, recommendation regarding accommodation needs and your justification for this recommendation** on your professional office stationery (no prescription pad paper please) and attach to this sheet.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Student:** You are required to submit this form to University Housing to document your accommodation request. If documentation is not received within five business days of the submission date of your application, your priority for a housing assignment will be based on the date of receipt of the documentation. Return completed form and attached statement with your application to:

Doug White  
Housing Information Office  
1011 Student Activities Building  
515 E. Jefferson Street  
Ann Arbor, MI 48109-1316  
fax: (734) 764-6806, attention: Doug White