

# PREGNANCY ACCOMMODATION REQUEST FORM

## Section 1: Contact Information

Name:

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E-mail Address:

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Telephone Number:

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PID:

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## Section 2: Student Information

Major/Program:

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Department:

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## Section 3: Applicant Information

Application Submission Date:

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Program Applied For:

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## Section 4: Requested Accommodation(s) (including course absences/modifications)

A. Identify the accommodation(s) or modification(s) you are requesting.

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**DISPOSITION**

Request Approved:

- Yes
- No

Identify accommodation(s) provided:

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Identify individual(s) notified:

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If denied, state the reason (e.g., Undue Burden, unreasonable, etc.).

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

### University Approved Absence Office Notification

Student \_\_\_\_\_ (PID \_\_\_\_\_) has been granted a University Approved Absence for the dates and classes listed below.

Class	Dates of Approved Absence