



MARICOPA COUNTY JUSTICE COURTS TITLE II ADA REQUEST FOR ACCOMMODATION

Applicant (*name*):

Street Address:

Email Address:

Telephone Number:

Applicant is: Juror Witness Party Attorney Other

Name of Court or Court Program, Service or Activity for which Accommodation is requested:

Location/Address:

Case Name (*if applicable*):

Case Number:

Type of proceeding, court service, activity, or program:

Civil Criminal Other

Proceeding, court service, program, or activity (e.g., trial, preliminary hearing, bail hearing, etc., or other):

Applicant requests accommodation under Title II of the Americans with Disabilities Act, as follows:

Dates accommodation needed (*specify*):

Impairment necessitating accommodation (*specify*):

Type of accommodation requested (*specify*):

Special requests or anticipated problems (*specify*):

In addition to the basic application information, the ADA Office may need to better understand the nature of your disability and how it impacts your ability to actively participate in the court environment. We reserve the right to request documentation from the appropriate medical or psychological provider that identifies your disability and provides sufficient information regarding the limitations of the disability. This information will also assist the court to provide you with the appropriate accommodation.

(Print Name)

(Signature & Date)

Please submit the completed form, including any relevant supporting documentation, by email or U.S. mail to staff at the court handling your case.

Court addresses, phone numbers, and emails may be found at the top of your court paperwork or at the Justice Courts online: <http://justicecourts.maricopa.gov/locations>.

If you need help completing the form, please contact court staff. Alternative means of submitting an accommodation request, such as by personal interview or an audio recording, will be made available to qualified individuals with disabilities upon request.

Upon receiving the form court staff will, as soon as reasonably possible, provide a response to the request for accommodation.

For additional detailed information about the Maricopa County Superior Court's Title II ADA policies, please read the court's policy entitled, "Notice of Court Access Information for Persons with Disabilities." The notice is available online at: <http://www.superiorcourt.maricopa.gov/SuperiorCourt/AmericansWithDisabilitiesAct/docs/ADAFormNotice.pdf>.

Grievance Procedures: If you are dissatisfied with the response to your request, you may use the Grievance Procedures described in Maricopa County Superior Court's "Notice of Court Access Information for Persons with Disabilities." Grievances must be filed within 60 days of the alleged discriminatory act. You may also use any other remedy allowed under federal or state law by filing a complaint with the appropriate federal or state agency.

RESPONSE TO REQUEST FOR ACCOMMODATION

The request for accommodation is GRANTED

The request for accommodation is DENIED because:

The Applicant does not satisfy the requirements of Title II.

It would create an undue burden on the court.

It would fundamentally alter the nature of the court service, program, or activity.

Additional remarks:

ADA Coordinator (or Designee)

Date