## MARICOPA COUNTY JUSTICE COURTS TITLE II ADA REQUEST FOR ACCOMMODATION



Applicant Name	:				STICE COU				
Street Address:									
Email Address:									
Telephone Number:									
Applicant is:	Juror	Witness	Party	Attorney	Other				
Court Case Information									
Court name:									
Case Number:									
Type of proceedin	ig, court serv	vice, activity, or p	orogram:						
Civil	Crim	inal	Other	Don't Know					
Case event (e.g., initial appearance, hearing trial, etc., or other):									

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

Dates accommodation needed:

Impairment necessitating accommodation:

Type of accommodation requested:

Other special request or anticipated problems:

In addition to the basic application information, the ADA Office may need to better understand the nature of your disability and how it impacts participation in the court environment. We reserve the right to request documentation from the appropriate medical or psychological provider that identifies the disability and provides sufficient information regarding any limitations. This information assists the court in providing the appropriate accommodation.

Your name	(may	v be different	from	applicant	)
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Please submit the completed form, including any relevant supporting documentation, by email or U.S. mail to staff at the court handling your case.

All court contact information 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 individuals with qualifying disabilities upon request.

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

For additional detailed information about the court's Title II ADA policies, please read the Maricopa County Superior Court policy entitled, "Notice of Court Access Information for Persons with Disabilities." This is available online at:

https://superiorcourt.maricopa.gov/media/ywpkwvdu/notice-of-court-access-information-forpersons-with-disabilities.pdf.

Grievance Procedures: If you are dissatisfied with the response to your request, you may use the Grievance Procedures described on our web site: http://justicecourts.maricopa.gov/ada. 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.

<b>RESPONSE TO REQUEST FOR ACCOMMODATION</b>							
The request for accommodation is	GRANTED	DENIED for the reason(s) below:					
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					