

**OFFICE FOR STUDENTS WITH DISABILITIES
CALIFORNIA UNIVERSITY OF PA
(724) 938-5781
osdmail@calu.edu**

UNIVERSITY HOUSING ACCOMMODATION REQUEST FORM

Revised July 10, 2014

STUDENT (Please print): _____
CAL U ID#: _____ - _____ - _____ LOCAL PHONE #: () _____ - _____

ENROLLMENT STATUS

- I am a currently enrolled Cal U student
 I will be a new Cal U student: Fall 20__ Spring 20__ Summer 20__

DISABILITY ACCESS ACCOMMODATION REQUEST(S)

(Choose only ONE location below)

ON CAMPUS/THE SUITE LIFE

- Fall and Spring 20__ to 20__
 Fall Only 20__ Summer Session Dates: __/__/__ to __/__/__
 Spring Only 20__

IDENTIFY SPECIFIC ACCOMMODATION REQUEST(S)

- Request for specific room type (refer to Housing documents/Housing Web site for descriptions and pricing):
 2 Person Room (1 Bath) Single (1 Bath)
 2 Double Bedrooms (2 Baths) 2 Single Bedrooms (1 Bath)
 2 Double Bedrooms (1 Bath) 4 Single Bedrooms (2 Baths)
 Other: _____
 Other: _____

~ OR ~

OFF CAMPUS/VULCAN VILLAGE

- 1 – Year Lease 20__ to 20__ Other: _____

IDENTIFY SPECIFIC ACCOMMODATION REQUEST(S)

- Request: _____
 Request: _____

I UNDERSTAND AND AGREE TO:

- ✓ Accommodation requests must be reasonable and supported by documentation on file with OSD.
- ✓ OSD reserves the right to request additional documentation from the student.
- ✓ Students who request/receive accommodations must register with OSD each semester.
- ✓ All regular university housing procedures apply e.g., dates for application, deposit, contract and room assignment, etc.
- ✓ Approved housing accommodations are provided on a first-come, first-served basis per applicable university housing procedures.

(Student Signature)

_____/_____/_____
(Date)

