## Supreme Court / Court of Appeals ADA Accommodation Request

Name of Person Requesting Accommodation   Email Address	Case N	<b>I</b> O. (if any):	
2. The person who needs the accommodation is a  Applicant Program Participant Committee Member  Judge Other Interested Party:  3. The accommodation will be needed  on [Date] at [Time] a.m. p.m.  Location/Event:  4. The accommodation requested is Realtime (videotext) translation Assistive listening device Large print/enlarged materials American Sign Language (ASL) interpreter(s) Other sign language interpreter(s) [Specify] Oral Interpreter Wheelchair space Breaks for medical reasons [State reason/frequency] Other [specify]  5. The accommodation provided  Court Official / Department Manager	Name of Person Requesting Accommodation	Email Address	Address
Applicant Program Participant Committee Member Judge Other Interested Party:  The accommodation will be needed on [Date] at [Time] a.m. p.m. Location/Event:  The accommodation requested is Realtime (videotext) translation Assistive listening device Large print/enlarged materials American Sign Language (ASL) interpreter(s) Other sign language interpreter(s) [Specify] Oral Interpreter Wheelchair space Breaks for medical reasons [State reason/frequency] Other [Specify] Other [Specify] Court Official / Department Manager	Telephone/TTY Number	Date Request Submitted	
on [Date]	Applicant Program Participa	ant Committee Me	
Realtime (videotext) translation Assistive listening device Large print/enlarged materials American Sign Language (ASL) interpreter(s) Other sign language interpreter(s) [Specify] Oral Interpreter Wheelchair space Breaks for medical reasons [State reason/frequency] Other [Specify] Cher [Specify] Cart Official / Department Manager	On [Date]		·
. Reviewed and Approved By:	Realtime (videotext) translation  Assistive listening device  Large print/enlarged materials  American Sign Language (ASL) in  Other sign language interpreter(s)  Oral Interpreter  Wheelchair space  Breaks for medical reasons [State re  Other [Specify]	[Specify]ason/frequency]	
		Court Official / De	partment Manager
Print Name Date Signed		Print Name	