

REASONABLE ACCOMMODATION REQUEST FORM

Case Information	
Case Number(s):	Case Date(s):
Case Name:	
Requestor Information	
Name:	On behalf of:
Address	
Phone:	E-mail:
Assembled Begue	
Accommodation Request	
List all known dates/times that accommodation(s) are needed:	
	rou need and how will it help provide for your needs? on that would help us respond to your request.
How do you want to be informed of the status of your request for accommodation? Phone Postal Mail E-mail In person Other (please specify)	
	rm(s) to the Department of Judicial Administration via contacts below. nue Room E609 -or- E-mail: djaaccommodations@kingcounty.gov 08104-2386