Tri-Valley Opportunity Council, Inc.
Transportation Programs

REASONABLE ACCOMMODATION REQUEST FORM

Tri-Valley Opportunity Council, Inc. (TVOC) is committed to providing equal access to transportation services in accordance with the Americans with Disabilities Act (ADA). Individuals with disabilities may request reasonable accommodations or modifications to policies, practices, or procedures when necessary to access transportation services.

Requests may be submitted in writing using this form or made verbally by contacting TVOC Transportation Programs. Assistance completing this form is available upon request.

Date: _____

APPLICANT INFORMATION

First Name: _____Last Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone Number: _____
Email Address: _____

Preferred Method of Contact:

☐ Phone ☐ Email ☐ Mail

Best Time to Contact You: _____

AUTHORIZED REPRESENTATIVE (IF APPLICABLE)

If someone is assisting you or submitting this request on your behalf, please complete the following:

Representative Name: _____
Relationship to Applicant: _____
Phone Number: _____
Email Address: _____

REQUESTED ACCOMMODATION

Please describe the accommodation or service modification you are requesting. Include details about where, when, and how the accommodation would assist you in accessing TVOC transportation services.

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REASON FOR REQUEST
Please explain how this accommodation is necessary because of a disability.

CURRENT USE OF SERVICE
Can you use the transportation service without this accommodation?

☐ Yes
☐ No

If yes, please describe any difficulties or limitations you experience:

SUPPORTING INFORMATION (OPTIONAL)

You may attach additional information that supports your request. Supporting documentation is not required in all cases. However, TVOC may request additional information if necessary to evaluate the accommodation request.

SUBMISSION INFORMATION

Completed forms may be submitted by:

Email: marion.henry@tvoc.org

Mail:
Tri-Valley Opportunity Council, Inc.
Attn: Marion Henry
1345 Fairfax Ave.
Crookston, MN 56716

You may also submit a request verbally by contacting TVOC Transportation Programs.

REVIEW PROCESS

1. TVOC will review the request and may contact the applicant or representative for additional information.
2. Requests will be evaluated on an individual basis.

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PRIVACY NOTICE

Information provided on this form will be kept confidential to the extent permitted by law and used solely for the purpose of evaluating and responding to requests for reasonable accommodation. Information will be shared only with individuals who have a legitimate business need to review the request.

NON-DISCRIMINATION STATEMENT

Tri-Valley Opportunity Council, Inc. does not discriminate on the basis of disability and will make reasonable modifications to policies, practices, and procedures when necessary to ensure accessible transportation services, unless doing so would fundamentally alter the nature of the service or create an undue administrative burden.

AGENCY USE ONLY
Date Received: _____
Received By: _____
Date Reviewed: _____
Reviewed By: _____

Decision:
☐ Approved
☐ Approved with Modifications
☐ Denied

Date Applicant Notified: _____

Accommodation Granted (if applicable):

_____
_____

Reason for Decision (attach additional documentation if needed):

_____
_____
_____

Appeal Filed:
☐ Yes
☐ No

Appeal Outcome: _____