

Reasonable Accommodation How to Guide

(for Employees)

What to know before you begin:

- You must be a qualified individual with a disability
 - Your supervisor needs to know how you meet the definition of a qualified individual with a disability under the Rehabilitation Act (definitions below)
 - ✓ Individual with a disability is a person who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such impairment, or is regarded as having an impairment (regardless of whether or not it limits or is perceived to limit a major life activity)
 - ✓ Qualified individual with a disability is an individual with a disability, who satisfies the requisite skill, experience, education and other job-related requirements of the employment position such individual holds or desires, and who, with or without reasonable accommodation, can perform the essential functions of such position
 - Sufficient medical documentation may be needed regarding
 - ✓ Nature, severity, and duration of the impairment
 - ✓ Activity or activities that the impairment limits
 - ✓ Extent to which the impairment limits your ability to perform the activity/activities
 - ✓ Why you require reasonable accommodation
- Your supervisor will need to know
 - ✓ The precise nature of the workplace that is generating the request
 - ✓ How a disability is prompting the need for an accommodation in the essential functions of the assigned position
 - ✓ Possible alternative accommodations that may be effective in meeting your need for reasonable accommodation
- Essential functions are the functional job duties of the employment position the individual with a disability holds or desires
 - ✓ The term essential functions does not include the marginal functions of the position
 - ✓ Determination of the essential functions of a position must be conducted on a case-by-case basis so that it reflects the job as actually performed and not simply the components of the generic position description

NOTE: Lowering or changing a performance standard because an employee cannot meet it due to a disability is **NOT** considered a reasonable accommodation.

NOTE: Reassignment/Change to a Lower Grade as a Form of Reasonable Accommodation. If it becomes apparent through medical documentation that an accommodation cannot be made in the employee's current position, reassignment as a form of reasonable accommodation will be considered as a last resort.

Outline of the process:

- The reasonable accommodation process begins with the employee requesting an accommodation by submitting an electronic Reasonable Accommodation Request
- After submission a confirmation will be sent to you via email
- The Disability Program Manager (DPM) and supervisor will review the request and determine if request constitutes an accommodation
- It is recommended that you upload medical documentation of your impairment electronically when submitting the request
- Once your supervisor has sufficient medical documentation, he/she will make one of the following decisions
 - ✓ Grant the accommodation
 - ✓ Grant an accommodation other than the one requested
 - ✓ Recommend Denial of an accommodation

Follow below screen shots to submit a request

Copy and paste the link below into a web browser:

<https://forms.osi.apps.mil/pages/responsepage.aspx?id=jbExg4ct70jjX6yIGOv5tD5WkmzuZEBIh0-bxJ1Ow1xURVI0TzNESk01OTHeOVEyOUhZSU1MWVY0QiQIQCN0PWcu>

Reasonable Accommodation Request and DPM/AEPM Site

This is the Reasonable Accommodation Request and DPM/AEPM SharePoint site. From here, you can do all of the following:

- Submit a Reasonable Accommodation Request
- Register as a Disability and/or Affirmative Employment Program Manager for your installation
- Navigate to and create an account on Envision. See the instructions below for more details.
- Review Disability Program Managers on the AF Portal
- Air Force Wounded Warrior (AFW2) Program: Refer an Airman or Guardian to the AFW2 program
- Join the DPM Microsoft Teams channel

Note: The forms are powered by Microsoft Power Apps. You must also be logged into Office 365 Outlook and on an AF network/VPN for Power Apps to function properly.

Forms



Click here



* Required

General Information

Fill out the following fields with information for the individual on whose behalf the form is being submitted.

2. Are you submitting the request for yourself or on behalf of someone else? *

- I am the employee requesting the accommodation.
- I am submitting a reasonable accommodation request on behalf of another individual.

3. Current vs Assigned Duty Location

You may be assigned to one base but are currently working at another base. This question helps us route your request to the appropriate Disability Program Manager

- My current duty location IS NOT my assigned duty location
- My current duty location IS my assigned duty location

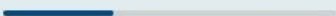
4. Current Duty Location *

What is your current duty location? I.e. where do you normally go to work? This may be different from your assigned duty location.

DUTY LOCTATION AFB 

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Accommodation Information

5. Select all of the following items needed to support this accommodation request

- Assistive technology/telecommunications device
- Building modifications
- Leave without pay
- Light duty or job restructuring
- Reassignment
- Services (job assistant, coach, CART, interpreter, translator, etc.)
- Telework
- Transportation
- Workspace modifications or equipment (HEPA filtration, ergonomic chair or desk, lighting changes, etc.)
- If the accommodation you are requesting is not explicitly listed above, please check this response and describe in detail below.

6. Please describe what accommodation is needed.

Enter your answer

7. Please explain how the accommodation will allow you to do the essential function of your job and/or participate in activities.

Enter your answer

8. Please describe the disability for which you need the accommodation.

Use this space to provide information on the disability, illness, or other factor which is the impetus for this request.

Enter your answer

9. Documents (Non-anonymous question🗕)

Upload any relevant documentation you would like to provide in support of this request (e.g. letter from physician). Submitted documentation can be reviewed by your Disability Program Manager. Please note that file names can contain alpha-numeric characters along with spaces and dashes (- or _). Filenames cannot contain special characters (e.g. #, \$, %, /, \, etc.).

📁 Upload file

Supporting medical documentation

File number limit: 10 Single file size limit: 100MB Allowed file types: PDF

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* Required

Supervisor Information

Please note that the supervisor you list below will be contacted to review and confirm your request. You may choose which supervisor in your chain of command you would like to notify. Your supervisor will receive the following information:

1. Requested items
2. Accommodation Description
3. Enables Job Function Explanation
4. Disability Description

The supervisor will not receive any supporting documentation.

If your supervisor does not have a us.af.mil or spaceforce.mil email, please have them request guest access to DAF365 before you submit the request (<https://myaccess.microsoft.us/%40USAF.onmicrosoft.com#/access-packages/ed68f8f8-e718-4427-a1bb-10439357db0c>).

Note: You must provide the official .mil address

10. Supervisor Email *

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Feedback

11. Please include any comments with suggestions for changes or updates to this form

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Submit

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Reasonable Accommodation Request (RAR) v3

Thanks!

Your Reasonable Accommodation Request was submitted. The request is now under review by your supervisor. We recommend that you reach out to your supervisor to discuss the request.

Once your supervisor has approved your request, it will then be worked by a Disability Program Manager. For more information,

visit <https://usaf.dps.mil/teams/ReasonableAccommodationRequestPublicTeam/SitePages/Reasonable-Accommodation-Request-and-DPM-AEPM-Site.aspx>

V/R, 
SAF/DI Reasonable Accommodation Team

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