

ODA Use Only	
Date request received:_	Processed
in ODA by (initial)	Date Orientation
Informed	_Contacted

UNT Reasonable Accommodation Request for Orientation

Form must be submitted to the UNT Office of Disability Accommodation (ODA) **2 weeks prior to your orientation date** by fax at 940-369-7969 or email to **Apply.ODA@unt.edu** (DO NOT SEND BY MAIL).

Student Name:	Date of Birth:	
Today's Date:	Date(s) Orientation:	
Type of Orientation (Check) Parent:	_New Student:Transfer:Grad Student:	
Reasonable Accommodation(s) Request audio amplifier, screen magnification so	ted (e.g. Sign Language Interpreter, FM loop personal ftware):	
date or I cannot be guaranteed assistant wheelchairs/scooters, orientation and m only applies to new freshman and transf	able accommodation TWO WEEKS before my orientation ce. UNT does not provide personal care items such as mobility services, or personal attendant care. This form fer orientation, to request reasonable accommodations in es here: http://www.unt.edu/oda/apply/index.html.	
Participant Signature	Date	