



Employee Request for Workplace Accommodation Form
Department of Human Resources

Workplace accommodation refers to the University's obligation under the Ontario Human Rights Code to prevent and remove barriers and provide reasonable accommodation to the point of undue hardship. The purpose of this form is to gather the information required to initiate and facilitate the accommodation process in a timely manner under one or more grounds of the Code. Each accommodation request will be considered on an individual, case-by-case basis in order to determine the most reasonable and appropriate accommodation based on the employee's individual circumstances. Please refer to the Workplace Accommodation Guidelines for an overview of the workplace accommodation process including the responsibilities of Human Resources, supervisors, employees and the union (if applicable).

Please submit the completed form via e-mail to your immediate supervisor. Your supervisor will then contact Human Resources to facilitate the accommodation process. As with all personnel matters, the University will maintain the confidentiality of the information related to an accommodation request. By submitting this form, you consent to disclosing the information provided in this form to the parties that need to be engaged in the accommodation process (i.e., supervisor, Human Resources, and the union - if applicable).

Should you have any questions or need assistance completing the form, please reach out to your supervisor, union representative (if applicable) or the applicable Labour Relations Manager or Human Resources Manager (Managerial and Professional Group).

Date: _____

Form with fields for Name, Position, and Department.

1. Which Human Rights ground(s) is your accommodation request related to?

Disability and/or medical condition

Religion

Marital or family status

Not sure

Other (please specify): _____

4. How will your requested accommodation(s) support your ability to perform the duties of your position in accordance with your job description?

5. What is the expected duration/time period for this accommodation?

Medical Accommodation Requests

Medical documentation from your medical practitioner will be required to substantiate any medical accommodation requests. The University will need to understand the medical restrictions or limitations that you are experiencing from your medical condition, illness, or injury as they relate to your ability to attend work and/or perform the duties and responsibilities outlined in your job description. Information regarding your prognosis, but not the actual medical condition, will also be required.

Do not submit any medical documentation with this form. Human Resources will contact you to discuss the required medical documentation.

**Please submit the completed form via e-mail to your immediate supervisor.
All requests will be acknowledged in a confidential and timely manner.**