**University of Texas at San Antonio**

**Student Disability Services (SDS)**

**Accessible Furniture Request Form**

* **You must be registered and requested your letters of accommodation for the current semester to request accessible furniture**
* **Please complete all the blanks with the information requested**
* **Allow a minimum of 10 business days for furniture placement into the classrooms**
* **If you have questions please contact us at 210-458-4157**

**Date of Request: Semester: Year:**

**Student Name: Banner Number:**

**Telephone Number: E-Mail Address:**

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| --- | --- | --- | --- |
| **Course Name, Number & Section** | **Instructor’s Name** | **Building/Room Number** | **Day of Class and Time** |
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**Comments:**

**For Office Use Only:**

**Student has requested letters: yes no date:**

**Furniture Placed/Date of Placement:**

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| --- | --- | --- | --- |
| **Course Name, Number & Section** | **Type of Furniture** | **Date Placed/completed** | **Building/Room Number** |
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