



VIRGINIA'S JUDICIAL SYSTEM
Request for Accommodation under the Americans with Disabilities Act

Date: _____

PLEASE PRINT:

Person requesting accommodation: _____

Address: _____

Daytime phone number: _____ E-mail: _____

Type of accommodation requested: (please be specific) _____

Date accommodation is needed: _____

Location where accommodation is needed (i.e. courtroom, office): _____

Supreme Court Court of Appeals Circuit Court General District Court

Juvenile & Domestic Relations District Court Other _____

Is this accommodation related to a pending case?

Yes If yes, then please file the request with the clerk of the court where the case is pending, along with any additional materials that the court may require. If the proceeding is before a magistrate or special justice, then your request should be addressed to the attention of the magistrate or special justice.

Case Name: _____ Case type: _____

Case number: _____ Court date: _____

No If no, then please send the request to: ADA Coordinator
Renée Fleming Mills, Ph.D.
Office of the Executive Secretary
Supreme Court of Virginia
100 N. 9th Street
Richmond, Virginia 23219
Fax: 804-786-0109
Email: ADACoordinator@vacourts.gov

Please sign to verify the foregoing is accurate: _____

Please print your name: _____

Office Use Only

Accommodation: Granted Denied Notification date: _____

Comments: _____