

Virginia's Judicial System

Request for Accommodation under the Americans with Disabilities Act

PLEASE PRINT				
Person Requesting Accommodation	Requesting Accommodation		Date (mm/dd/yyyy)	
Address		City	<u> </u>	Zip Code
Email	Telephone			
Date accommodation is needed (mm/dd/yyyy)				
Please specify type of accommodation requested:				
Location where accommodation is needed (e.g. courtroom, c OSupreme Court OCourt of Appeals OCircuit Court OOther	-	Court OJuvenile & Dome	estic Relations I	District Court
OCourt Location				
Is this accommodation related to a pending case?				
Oves If yes, then please file the request with the cle that the court may require. If the proceeding i the attention of the magistrate or special justi	s before a magistrate or			
Case Name	Case Ty	be		
Case Number	Court Da	ate		
Renée Office Suprer 100 N. Richme Fax: 80	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: ADAOffice@vacourts.gov			
Please sign to verify the foregoing is accurate				
Signature	re Print Name			
Office Use Only				

		Notification Date (mm/dd/yyyy)
Granted	Denied	
	Granted	Granted Denied