4-H Accommodation Request

The University of Illinois encourages qualified persons with disabilities to participate in its programs and activities. If you anticipate needing any type of accommodation or have questions about the accessibility requirements of a 4-H event, please contact [name and phone number of county 4-H staff] in advance of your participation or visit.

A request for a reasonable accommodation can be made at any time. It is best, however, to make the request as far in advance as possible in order to allow time to review your request and to make arrangements for the accommodation, if needed. You should give a minimum of ten (10) working days' notice, if possible. In emergency situations, the ten-day requirement can be waived, but you should make your request as soon as you know that you may need an accommodation.

Request Made to Staff:	(Day/Month/Year)	
Accommodation is Needed:	(Day/Month/Year)	
Staff Submitted Request:	(Day/Month/Year	
Individual requesting an accommod	ation:	(Last name, first name)
Role: 🗆 4-H Member 🗆 4-H Adult \	/olunteer □ Other (please describe)	rend ne neuron mente de la coloni de la decida de la colonia mente de la colonia mente de la colonia mente del
County:	_	
Dates (s) of event/activity/meeting	where accommodation is requested:	
Name of event/activity/meeting:		
Type of accommodation requested:	(please attach document if additional space is	needed)
Request submitted by:		
Phone:	Email:	

