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# REQUEST FOR AUXILIARY AIDS AND/OR SERVICES (non-students)

If you need an assistive listening, vision, or speech aid or service in order to attend or participate in a school district event or activity, please complete this form and send to:

Mr. Eric DeJong  
ADA Compliance Officer for Title II  
315 N French Ave  
Arlington, WA 98223  
edejong@asd.wednet.edu  
360.618.6212

To ensure that reasonable accommodation requests can be met, the District needs as much advance notice as possible. Please be sure that the District receives your request at least two (2) business days in advance of the event or activity\*.

*\* Reasonable efforts will be made to accommodate requests made less than two business days in advance of a scheduled program, activity, or event.*

If aids or services are needed for a meeting of the Board of Directors, please contact the Superintendent's office directly at 360.618.6202.

Today's Date:

**Request Type** (please check all that apply):

- Assistive **L**istening Aid or Service
- Assistive **V**ision Aid or Service
- Assistive **S**peech Aid or Service
- O**ther Specify: \_\_\_\_\_

Name of Individual Making Request:

Daytime Phone Number:

Email Address:

Aids/Services are being requested for:  Myself

Someone else - Name:

Event Name:

Event Description (i.e. meeting, performance, sporting event, etc.):

Event Date:

Start Time:

Anticipated End Time:

Location (school or building):

Other relevant details:

**School District Use Only:**

Date Received:

Aid or service to be provided:

Date Ordered:

From:

Notes: