

Non-Disability Workplace Accommodation Request

The Non-Disability Workplace Accommodation Request form is to be completed by the employee. Completed forms should be submitted via e-mail to your supervisor/manager. Your supervisor/manager will then contact Human Resources to facilitate the process.

Should you have any questions or need assistance completing the form or would prefer not to submit the form to your manager directly, please reach out to your union representative or contact humanrights@flemingcollege.ca for assistance.

Please refer to Fleming College's Return to Work and Medical Accommodation Procedures [Return to Work/Medical Accommodation | Human Resources Department \(flemingcollege.ca\)](#) if your accommodation request is medical or disability-related.

Employee Information

First Name:	Last Name:
Job Title:	Division:
Employee ID #:	Email Address:
Date of Request:	

Supervisor/Manager Information

First Name:	Last Name:
Job Title:	Division:
Email Address:	

Accommodation Information

<p>Is your request for accommodation linked to one or more protected grounds under the Ontario's <i>Human Rights Code</i> and Fleming College's <i>Harassment and Discrimination Prevention and Response Policy</i>?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>Is your accommodation request permanent or for a fixed time period?</p> <p><input type="checkbox"/> Permanent</p> <p><input type="checkbox"/> Fixed Start Date: _____ End Date: _____</p> <p><input type="checkbox"/> Unsure/Unknown at this time</p>
<p>If yes, identify the protected ground(s):</p> <p><input type="checkbox"/> Family Status</p> <p><input type="checkbox"/> Creed</p>

- Gender Identity/Gender Expression
- Sex and/or Pregnancy
- Other: _____

What is the barrier or restriction that you are experiencing in the workplace? (e.g., my schedule doesn't allow for break times to breastfeed and/or express breast milk during break times)

If family status accommodation, please describe the family obligation for which you are requesting accommodation? (e.g., I am the primary caretaker for my elderly parent, who requires frequent care?)

If family status accommodation, have you taken steps to address your obligation? If "Yes", please provide us with details about the steps you have taken. If "No", what steps do you think you can take?*

Please describe the accommodation/change in work arrangement (e.g., work schedule, work location) you are requesting and how this will assist in removing the barrier.

Note: Whether you have previously taken steps to address your obligation does not impact whether Fleming College has a duty to accommodate. However, employees are required to be open to reasonable alternatives, this can help minimize back-and-forth to indicate other arrangements that have been attempted and failed.