

# Reasonable Accommodation How-to Guide for Employees

This guide provides a clear roadmap for requesting reasonable accommodations, ensuring your needs are met while upholding the requirements outlined in DAFI 36-2710.

## I. Understanding Your Rights and Responsibilities

Before submitting a request, familiarize yourself with these key points:

- **Qualified Individual with a Disability:** To be eligible for reasonable accommodation, you must meet specific criteria under the Rehabilitation Act:
  - **Individual with a Disability:** You must have a physical or mental impairment that substantially limits one or more major life activities, have a record of such impairment, or be regarded as having such an impairment. This applies whether or not the impairment actually limits a major life activity or is perceived to do so.
  - **Qualified Individual with a Disability:** You must also satisfy the skill, experience, education, and other job-related requirements of your position, and be able to perform its essential functions with or without reasonable accommodation.
- **Essential Functions:** These are the fundamental job duties of your position, determined on a case-by-case basis, reflecting actual job requirements, not simply the generic position description.
- **Medical Documentation:** Providing sufficient documentation is crucial. This may include information about:
  - The nature, severity, and duration of your impairment.
  - The specific activity or activities limited by your impairment.
  - The extent to which your ability to perform those activities is limited.
  - Why you require reasonable accommodation to perform your job effectively.
- **Communicating with Your Supervisor:** Ensure your supervisor understands:
  - The specific workplace conditions necessitating your request.
  - How your disability impacts your ability to perform the essential functions of your position.

- Potential alternative accommodations that could effectively address your needs.
- **Important Notes:**
  - **Performance Standards:** Lowering or changing performance standards is NOT considered a reasonable accommodation.
  - **Caregiver Responsibilities and Temporary Conditions:** These situations are not eligible for a reasonable accommodation, please discuss with your supervisor other appropriate avenues for assistance (EMR/HR).
  - **Reassignment:** While reassignment to a different position may be considered as a last resort if accommodation within your current position is deemed impossible, it is not guaranteed and is subject to available vacancies and your qualifications.

## II. The Reasonable Accommodation Process: A Step-by-Step Guide

1. **Submitting Your Request:** Begin the process by submitting an electronic Reasonable Accommodation Request. You can access the form here: <https://forms.osi.apps.mil/pages/responsepage.aspx?id=jbExg4ct70ijX6yIGOv5tD5WkmzuZEBIh0-bxJ1Ow1xURVI0TzNESk01OThEOVEyOUhZSU1MWVY0QiQIQCN0PWcu>
2. **Confirmation:** Upon submission, you will receive an email confirmation.
3. **Review and Determination:** The Disability Program Manager (DPM) and your supervisor will review your request to determine if it constitutes a reasonable accommodation.
4. **Medical Documentation:** For efficient processing, it is highly recommended to upload your medical documentation supporting your impairment when submitting your request.
5. **Decision:** Once your supervisor has reviewed your request and any necessary medical documentation, they will make one of the following decisions:
  - **Grant the accommodation:** Your requested accommodation is approved.
  - **Grant an alternative accommodation:** An alternative accommodation is deemed more suitable and is approved.

- **Recommend Denial of the accommodation:** Your supervisor recommends denying your request and will provide justification for this decision.

### III. Navigating the Online Request System (See Screenshots below)

This guide is intended to help you navigate the reasonable accommodation process with ease and clarity. Please consult with your supervisor or the DPM if you have any questions or require further assistance.

#### Reasonable Accommodation Request and DPM/AEPM Site

This is the Reasonable Accommodation Request and DPM/AEPM SharePoint site. From here, you can do all of the following:

- Submit a Reasonable Accommodation Request
- Register as a Disability and/or Affirmative Employment Program Manager for your installation
- Navigate to and create an account on Envision. See the instructions below for more details.
- Review Disability Program Managers on the AF Portal
- Air Force Wounded Warrior (AFW2) Program: Refer an Airman or Guardian to the AFW2 program
- Join the DPM Microsoft Teams channel

*Note: The forms are powered by Microsoft Power Apps. You must also be logged into Office 365 Outlook and on an AF network/VPN for Power Apps to function properly.*

#### Forms

 Reasonable Accommodation Request Form	 Register as DPM/AEPM	 Supervisor Review RAR	 Add Document to an Existing RAR
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**Click on Reasonable Accommodation Request Form**

\* Required

## General Information

Fill out the following fields with information for the individual on whose behalf the form is being submitted.

2. Are you submitting the request for yourself or on behalf of someone else? \*

- ☒ I am the employee requesting the accommodation.
- ☐ I am submitting a reasonable accommodation request on behalf of another individual.

### 3. Current vs Assigned Duty Location

You may be assigned to one base but are currently working at another base. This question helps us route your request to the appropriate Disability Program Manager

- ☐ My current duty location IS NOT my assigned duty location
- ☒ My current duty location IS my assigned duty location

### 4. Current Duty Location \*

What is your current duty location? I.e. where do you normally go to work? This may be different from your assigned duty location.

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**Select applicable options**

## Accommodation Information

5. Select all of the following items needed to support this accommodation request

- ☐ Assistive technology/telecommunications device
- ☐ Building modifications
- ☐ Leave without pay
- ☐ Light duty or job restructuring
- ☐ Reassignment
- ☐ Services (job assistant, coach, CART, interpreter, translator, etc.)
- ☐ Telework
- ☐ Transportation
- ☐ Workspace modifications or equipment (HEPA filtration, ergonomic chair or desk, lighting changes, etc.)
- ☐ If the accommodation you are requesting is not explicitly listed above, please check this response and describe in detail below.

6. Please describe what accommodation is needed.

Enter your answer

**Select applicable options and provide responses**

7. Please explain how the accommodation will allow you to do the essential function of your job and/or participate in activities.

Enter your answer

8. Please describe the disability for which you need the accommodation.

Use this space to provide information on the disability, illness, or other factor which is the impetus for this request.

Enter your answer

9. Documents (Non-anonymous question<sup>ⓘ</sup>)

Upload any relevant documentation you would like to provide in support of this request (e.g. letter from physician). Submitted documentation can be reviewed by your Disability Program Manager. Please note that file names can contain alpha-numeric characters along with spaces and dashes (- or \_). Filenames cannot contain special characters (e.g. #, \$, %, /, \, etc.).

 Upload file

File number limit: 10 Single file size limit: 100MB Allowed file types: PDF

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**Upload supporting medical documentation in box 9 by clicking upload file**

\* Required

## Supervisor Information

Please note that the supervisor you list below will be contacted to review and confirm your request. You may choose which supervisor in your chain of command you would like to notify. Your supervisor will receive the following information:

1. Requested items
2. Accommodation Description
3. Enables Job Function Explanation
4. Disability Description

The supervisor will not receive any supporting documentation.

**If your supervisor does not have a [us.af.mil](mailto:us.af.mil) or [spaceforce.mil](mailto:spaceforce.mil) email, please have them request guest access to DAF365 before you submit the request (<https://myaccess.microsoft.us/%40USAF.onmicrosoft.com#/access-packages/ed68f8f8-e718-4427-a1bb-10439357db0c>).**

Note: You must provide the official .mil address

10. Supervisor Email \*

Enter your answer

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## Feedback

11. Please include any comments with suggestions for changes or updates to this form

Enter your answer

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Submit

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## Reasonable Accommodation Request (RAR) v3



Your Reasonable Accommodation Request was submitted. The request is now under review by your supervisor. We recommend that you reach out to your supervisor to discuss the request.

Once your supervisor has approved your request, it will then be worked by a Disability Program Manager. For more information, visit <https://usaf.dps.mil/teams/ReasonableAccommodationRequestPublicTeam/SitePages/Reasonable-Accommodation-Request-and-DPM-AEPM-Site.aspx>

V/R,   
SAF/DI Reasonable Accommodation Team

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