D Center: Accommodations Request

You can print out this form and submit a hardcopy in person, or scan the document and send it to dcmedia@uw.edu titled: “Accommodations Request.”

This request is eligible for RSO and/or any University of Washington entities and the event that requesting an interpreter for must be on the University of Washington, Seattle campus. More details on our policies for accommodation requests may be found on the website under "Accommodations Request."

If there are any further questions regarding accommodations request, please e-mail me at dcmedia@uw.edu.

** Please note that in order to secure accommodation requests, requests should be made 10-15 days in advance. If you are requesting on a shorter notice, DSO will try their best.

Name: ____________________________________________________________

Email address: _____________________________________________________

Preferred pronoun(s) (optional): ______________________________________

RSO/Organization Name: _____________________________________________

SAO/RSO advisor name (if applicable): _________________________________

Will you be collaborating with another group? ☐ Yes ☐ No

If yes, with who? Please provide name and e-mail address:

Name: ____________________________________________________________

E-mail: ____________________________________________________________

Event title: _________________________________________________________

Description of the event: _____________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
Date (MM/DD): _________________________________________________________

Time the event starts and ends: __________________________________________

Location of the event: __________________________________________________

Please specify where the event will be held, such as an address or building and its room number.

Kind of accommodations requested (i.e., ASL interpretation, captioning, etc):

☐ ASL Interpreters
☐ CART/Real-Time Transcribing
☐ Video Captioning
☐ Other: ______________________________________________________________

I certify that I have read the policies for D Center Interpreter Fund for Registered Student Organizations/UW students/Events (Electronic Signature):

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