Have you taken steps to address your obligation: ◯ Yes ◯ No

If “Yes” , please provide us with details about the steps you have taken to secure alternate family care, including arrangements, explored with other family members, or caregivers, seeking publicly available family care services, etc. Please describe the barrier, if any, that you have encountered:

If “No”, what steps can you take?

Family Status Accommodation Requested

Please describe the accommodation you are requesting and how it will assist:

Are there any other accommodations that could assist you besides your preferred one?

For how long is the accommodation required?

Please provide any additional information that may assist us in considering your accommodation request: