

# Request for Reasonable Accommodation Documentation of Disability

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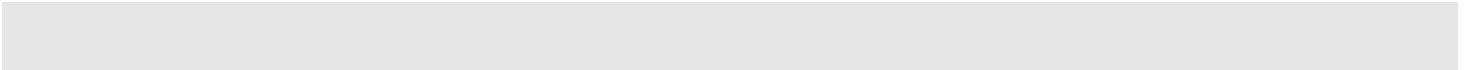
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To the Employee:

~~CONFIDENTIAL~~  
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## RELEASE OF INFORMATION:

~~CONFIDENTIAL~~  
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## II. MEDICATION AND/OR CORRECTIVE MEASURES:

~~None~~ ~~None~~

## III. SUSTANTIAL FUNCTIONAL LIMITATIONS:

~~None~~ ~~None~~ *major life activities, and* ~~None~~

~~None~~

~~None~~

## IV. RECOMMENDED ACCOMMODATIONS:

~~None~~ ~~None~~

~~None~~

~~None~~

~~None~~

~~None~~

~~None~~  
~~None~~  
~~None~~