## Arlington Central School District Office of Human Resources

144 Todd Hill Road, LaGrangeville, NY 12540, 845-486-4460

#### REQUEST FOR WORKPLACE ACCOMMODATION

	***Completed by	y Employee ***
Emi	ployee:	Date of Request:
	e:	
	ndition/limitation:	
	w does this condition/limitation affect your ability to perf	
		, ,
Wo	orkplace accommodation(s) requested:	
	***Completed by Emp	loyee's Physician ***
Phy	ysician (please print):	Date:
	sician Signature:	
	sed on ADA criteria, please explain how/why the employe	
	ability (attach additional pages as needed):	
	ase identify the workplace accommodations that are eith perform the essential functions of his/her job (attach add	· · · · · · · · · · · · · · · · · · ·
	Accommodation(s)	Recommended or Required
		☐ Recommended☐ Required
		Recommended
		Required
		Recommended
		☐ Required

Return this form and any additional supporting documentation to:
Francesca Seidita, Administrative Assistant to the Assistant Superintendent for Human Resources at *fseidita@acsdny.org* or
Arlington Central School District
144 Todd Hill Road
LaGrangeville, NY 12540

# Arlington Central School District

## Office of Human Resources

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### MEDICAL INFORMATION/RECORDS RELEASE AUTHORIZATION

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A Release of information and/or medical	records to:	
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1/ Hope ÁQÁ@\^à^Ásĕc@\{ã^Ás@\Ásæà[ç^Á;æ{^åÁ;\[ç æà[c^Á,@\Á^]\^•^};•Ás@\ÁQE[ā*d;}ÂÛ&@	TEK Medical Services  Dr. Andrew Weber  075 Route 82, Suite 10 ewell Junction, NY 12533ÈÁ çãa^¦ÁtౖÁ&ãa& • • Át ^Át ^åã&æ∮Æ[} åããa]}Á ão@Ác@Á, @ • ã&ãæ)Á æ€ [  ÁÖã dã&dÈÁÓæ•[ Áæč c@ ¦ã ^Á; ^Á, @ • ã&ãæ)ÁtౖÁ^ ^æ• ^Áæ} ^Á ´åã * Ás` ơÁ, [ ơÁã ãơ^åÁtౖĒÁ;  [ * ¦^• • Á, [ ơ·• ĒÁ] ^ ¦æãç^Á, [ ơ·• ĒÁ ) åÁ¢Ëæê • ĒÁOååããā]}æ ^ĒÁÓŧãç^Á, ^¦{ ã • ã}}ÁtౖÁÖ¦ĒÁWeberÁtౖÁ]	
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Please sign, forward a copy to your physician and a copy to:

Francesca Seidita, Administrative Assistant to the Assistant Superintendent for Human Resources

fseidita@acsdny.org

or

Arlington Central School District, 144 Todd Hill Road, LaGrangeville, NY 12540
ATTN: Francesca Seidita