



Request for Reasonable Accommodation Documentation of Disability

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Outfit

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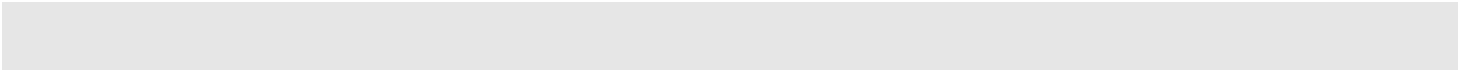
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Request for Reasonable Accommodation Documentation of Disability

To the Employee:

~~CONFIDENTIAL~~
~~CONFIDENTIAL~~

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RELEASE OF INFORMATION:

~~CONFIDENTIAL~~
~~CONFIDENTIAL~~

~~CONFIDENTIAL~~

~~CONFIDENTIAL~~

~~CONFIDENTIAL~~



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Documentation of Disability

II. MEDICATION AND/OR CORRECTIVE MEASURES:

~~None~~ ~~None~~

III. SUSTANTIAL FUNCTIONAL LIMITATIONS:

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

~~None~~

~~None~~

IV. RECOMMENDED ACCOMMODATIONS:

~~None~~ ~~None~~

~~None~~

~~None~~

~~None~~

~~None~~

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