



Request for Reasonable Accommodation

*You must provide a phone number or email address so we can contact you and process your request.

Date:

*Name:

Phone:

*Email address:

Details of Request

Type of Accommodation Needed:

Application Process (Application, Interview, Testing, etc.)

Attending an AGO Sponsored Training or a Meeting

Other

Additional information

Privacy notice, disclaimer and signature

Some or all of the information submitted on this form may constitute a public record. By selecting I agree below, you acknowledge that your request, once submitted, may become a public record subject to review by the Attorney General's Office for applicable restrictions on disclosure.

I agree

Name: