

Confidential

Lane Community College Americans with Disabilities Act (ADA) Complaint Form

Individuals protected by the Americans with Disabilities Act with concerns/complaints about Lane Community College's ADA compliance should fill out this form and submit it to one of the ADA compliance officers listed in Appendix D of the Student Code Handbook. If the ADA Complaint Form is not fully completed and signed, the complaint will be denied.

Name: _____ Telephone: (____)_____- _____

Address: _____

CHECK ONE: student employee job applicant other

Description of Disability: _____

Description of barriers to services, programs, facilities or employment: _____

Describe any contacts made with Lane Community College representatives regarding this problem:

Describe the remedy or accommodation requested: _____

SIGNATURE OF COMPLAINANT: _____ DATE: _____

SIGNATURE OF PREPARER: _____ DATE: _____
(If not Complainant)

You will be contacted within five working days of receipt of this form.

To request this information in an alternate format please contact the Center for Accessible Resources at (541) 463-5150 or accessibleresources@lanecc.edu

It is a policy of the state Board of Education and a priority of the Oregon Department of Education that there will be no discrimination and harassment on the grounds of race, color, sex, sexual orientation, marital status, religion, national origin, age, or disability in any educational programs, activities or employment. Inquiries may be directed to the Chief Human Resource Officer, (541) 463-5115.