



Supreme Court of the Virgin Islands

REQUEST FOR ACCOMMODATION BY PERSONS WITH DISABILITIES

PART I

Person Requesting an Accommodation

Name of person requesting accommodation	Telephone number	Date(s) accommodation is needed
Address (mailing address)	Case name or docket number (<i>if known or applicable</i>)	
Location where accommodation is needed <input type="checkbox"/> St. Croix <input type="checkbox"/> St. Thomas <input type="checkbox"/> Other (Specify): _____	Email (<i>optional</i>)	

PART II

Person is:

☐ Appellee ☐ Appellant ☐ Applicants (*Employment/VI Bar*) ☐ Public ☐ Other (*Specify*): _____

Type of matter/case/proceeding

☐ Appeal ☐ Bar Admission ☐ Disciplinary Hearing ☐ Other (*Specify*) _____

1. Describe the nature of the disability that necessitates accommodation

2. Describe how the disability affects a major life activity

3. Suggest the reasonable accommodation that is necessary

4. Special requests or additional comments

Signature

Date

In accordance with the Americans with Disabilities Act, it is the policy of the Supreme Court of the Virgin Islands to offer its public programs, services and meetings in a manner that is readily accessible to everyone, including individuals with disabilities. If you require a reasonable accommodation, please contact the Court's ADA Coordinators at (340) 774-2237 or (340) 778-0613 or via e-mail at ada@visupremecourt.org.



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PART III: COMPLETED BY COURT STAFF ONLY

Date Request Received:	Additional oral or written information requested? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Describe the information.

PART IV: DECISION

- ☐ The request for accommodation is **GRANTED**.
Describe the accommodation granted by the Court.
- ☐ The request for accommodation is **GRANTED with the following alternative accommodations:**
- ☐ The request for accommodation is **DENIED**,
- ☐ the applicant is not a qualified individual with a disability.
 - ☐ the requested modification would cause a fundamental alteration to the program or service.
 - ☐ the requested modification would present an undue financial or administrative burden.
 - ☐ Other (*specify*)
- ☐ If you do not agree with the decision, you can file a grievance / complaint of the decision. The grievance must be filed no later than sixty (60) calendar days after the act or decision that forms the basis of the complaint. Information about the grievance process and grievance forms can be obtained at any Supreme Court of the Virgin Islands location and on the Court's webpage.
- ☐ The applicant has been informed of the option to pursue other relief.

Virgin Islands Territorial ADA Coordinator
Office of the Governor
Arthur Abel Complex-315 Prince Street
Frederiksted, VI 00840

Office of the Attorney General
Virgin Islands Department of Justice
34-38 Kronprindsens Gade
St Thomas, VI 00802

US Department of Justice
950 Pennsylvania Avenue, NW
Civil Rights Division
Disability Rights Section-1425 NYAV
Washington, DC 20530

Supreme Court of the Virgin Islands

Date

Transmittal of a copy of this section of the accommodation request form by e-mail or U.S. Mail delivery is an allowable method of notification. If an accommodation is denied due to a finding of undue burden or fundamental alteration, the determination will be made in writing by the Chief Justice or his/her designee.

The Supreme Court of the Virgin Islands will maintain records of requests for reasonable accommodations for three years after a decision has been rendered.