Dear Student,

The Student Accessibility Services (SAS) encourages timeliness with student requests for housing accommodations and strongly recommends that students who received housing accommodations at Pace University (either NYC or Westchester) during the 2020-2021 academic year, complete the Housing Accommodation Request Packet (HARP) for Previously Granted Accommodations by March 15, 2021. Note: Housing selection begins the last week of March for students with medical accommodations. Please see the housing website (www.pace.edu/housing) for complete details and dates.

Determining accommodations is an interactive process between you (the student), SAS, and other relevant parties (if determined by SAS) and reviewing your request may take at least two weeks to process once all materials have been submitted. Your request will not be reviewed until the application, personal statement and documentation (if needed) have been received by the office.

If you are requesting a housing accommodation for the first time, do not complete this packet. Please complete the Housing Accommodation Request Packet: Academic Year 2021-2022 (HARP). It is available for download on the website, www.pace.edu/disability.

General Procedure

1. You must submit the general application for housing and pay the deposit abiding by deadlines and requirements of the Housing Office.
2. Student must complete the Disability Housing Accommodations Application, along with a personal statement, and return both to SAS.
3. After SAS receives the application and personal statement, SAS will determine if you need to meet with a coordinator to review your accommodation requests. If you need to meet with a coordinator, you will be notified via email to schedule an appointment. If you need to meet with an SAS coordinator and cannot meet in person, alternate arrangements may be arranged.
4. SAS will determine if updated medical documentation is necessary and inform you via email.
5. If you are required to submit updated medical documentation, it may be provided in the form of the Professional Disability Assessment Questionnaire: Housing (available on the SAS website) or a letter from a qualified medical professional. The letter must be written on the provider’s letterhead, signed and dated, and include the provider’s license information, if applicable. Documentation must demonstrate medical necessity and discuss the relationship of the disability to the accommodation request. Documentation will be reviewed upon receipt.
6. If you are required to submit updated medical documentation, SAS staff may request to speak with your medical provider for further clarification or questions related to the documentation as part of the interactive accommodations process. You may need to sign a release with your medical provider and/or SAS. SAS will contact you prior to reaching out to the provider.
If the previously granted housing accommodations are renewed, you will receive a letter (via email) from Student Accessibility Services confirming the granted accommodation(s). **It is then your responsibility to follow-up with the Office of Residential Life and Housing.** They may be reached via email (nyhousing@pace.edu) or phone (212-346-1295). Your room assignment will be made based on your granted accommodation(s) as well as building eligibility.

If the granted housing accommodation is not readily available (for example, a single room), you will be given a general room assignment and placed on a priority waitlist. You will be re-assigned, when the granted accommodation becomes available.

**Appeal Process:**

If the request is not granted, you may elect to call our office to schedule an appointment with Interim Associate Director, Ashley Sanguinetti-O’Connor, at (212) 346-1526. In this meeting, Ashley will review the committee determination and go over next steps with you, including instruction on submission of a formal appeal.

**Academic Accommodations**

As a reminder, **the housing accommodations request process is separate from requests for academic accommodations.** Additional documentation is required for academic accommodation requests and will be reviewed separately from requests for housing accommodations. Please contact SAS staff for any questions about this process.

Please submit inquiries to our general inbox, disability@pace.edu, or schedule an appointment by phone (212) 346-1526.

Sincerely,

**Student Accessibility Services**
New York City Campus
Disability Housing Accommodations Application for Previously Granted Accommodations

Instructions: Please complete this form, in its entirety, with details regarding your request for disability housing accommodations.

Submit this form, along with your personal statement, to Student Accessibility Services via email, disability@pace.edu; or fax (914.989.8047).

Please be in touch with Student Accessibility Services if you have any questions.

Name: ________________________________________________________________

U#: _________________________________________________________________

Date: __________________________________________________________________________

Academic Status (circle):

Undergraduate / Graduate

Rising year for academic year Fall 2021 - Spring 2022 (circle): 2nd year 3rd year 4th year

_____ year

Email: ________________________________________________________________

Phone: __________________________________________________________________________

Current building and room assignment: __________________________________________

Room assignment configuration for AY 20-21 (check all that apply):

☐ Single
☐ Double
☐ Triple
☐ Suite
☐ Shared, limited user bathroom
☐ Private bathroom
☐ Other: __________________________________________________________________________

Did the housing accommodations you were granted during the 2020-2021 academic year meet your needs? (Circle) Yes No

Please explain:

________________________________________________________________________

________________________________________________________________________
What is/are your disability(ies)? Please indicate if there have been changes to your disability status or you have acquired an additional disability.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

What housing accommodations are you requesting (check all that apply)? Note: All residence halls have community kitchens available for student use. There are no private kitchens.

☐ Single Room

☐ Accessible Bathroom

☐ Semi-private Bathroom

☐ Private Bathroom

☐ No carpet

☐ Placement on floor no higher than: __________

☐ Other Accommodation Request: ____________________________

☐ Same Request

☐ New Request

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
**Personal Statement:**

As part of the request process for housing accommodations, you must submit a personal statement. The statement should be typed and be a paragraph to no more than two pages in length. Personal statements that do not provide sufficient information about your request may be returned to you for revision.

The personal statement should include:

- Why you are requesting housing accommodations.
- A description of your disability(ies).
- A synopsis about how your disability affects academic functioning.
- A description about how the requested housing accommodation(s) will mitigate your disability.
- A brief history regarding your disability, interventions you may have tried prior to requesting accommodations or other information you feel is pertinent to your request.
- Explain the link between your disability and the requested accommodation(s).

**Student Signature:** ___________________________________________  **Date:** ____________

**Staff Use Only**

Received by: ___________________________________________  **Date:** ____________

Updated or New Documentation Required:  ☐ Yes ☐ No