

DENIAL OF ACCOMMODATION REQUEST

The purpose of this form is to inform you that your request has been denied and to provide information to you. If our information is incorrect, please inform me as soon as possible.

I am the Designated Management Official (DMO) for this request. My contact information is below.

MY NAME IS

MY PHONE NO. IS

MY EMAIL IS

YOUR REQUEST WAS MADE TO ENABLE YOU TO

- APPLY/INTERVIEW FOR A JOB,
- PERFORM THE ESSENTIAL FUNCTIONS OF YOUR POSITION, OR
- ACCESS A BENEFIT OR PRIVILEGE OF EMPLOYMENT.

YOU REQUESTED THE FOLLOWING ACCOMMODATION *(Describe briefly)*

YOUR REQUEST FOR ACCOMMODATION WAS DENIED BECAUSE

- YOU DO NOT HAVE A DISABILITY COVERED BY THE REHABILITATION ACT
- THE ACCOMMODATION REQUESTED WOULD NOT BE EFFECTIVE
- THE ACCOMMODATION WOULD REQUIRE REMOVAL OF AN ESSENTIAL FUNCTION OF THE JOB
- THE MEDICAL DOCUMENTATION PROVIDED WAS NOT ADEQUATE
- THE ACCOMMODATION WOULD REQUIRE LOWERING OF A PERFORMANCE OR PRODUCTION STANDARD
- THE ACCOMMODATION WOULD CAUSE AN UNDUE HARDSHIP

DETAILED REASON(S) FOR THE DENIAL OF THE ACCOMMODATION REQUEST *(Be specific, e.g., why the accommodation would not be effective)*

ALTHOUGH WE DID NOT PROVIDE THE ACCOMMODATION REQUESTED, WE DID OFFER AN ALTERNATIVE ACCOMMODATION WHICH WE BELIEVE WOULD BE MORE EFFECTIVE BECAUSE *(Describe)*

IF YOU WISH TO REQUEST RECONSIDERATION OF THE DECISION, YOU MUST

- Within seven (7) calendar days of receipt of this denial, request reconsideration by the Designated Management Official (DMO). After receiving a request for reconsideration, the DMO has seven calendar days to render a decision and notify the requestor, in writing.

IF YOU WISH TO FILE AN EEO COMPLAINT, PURSUE A MERIT SYSTEMS PROTECTION BOARD COMPLAINT, OR A UNION GRIEVANCE, GUIDANCE IS PROVIDED BELOW.

- To file an EEO complaint, applicants for employment or employees must contact an EEO counselor within forty-five (45) days of notice of the denial, pursuant to 29 C.F.R. Part 1614. Contact your local Office of Resolution Management for further information.
- Non-Bargaining Unit Employees may file an Administrative Grievance within 15 calendar days of receiving the denial. Contact your local Human Resources Office for further information.
- Bargaining Unit Employees may file a grievance in accordance with applicable Collective Bargaining Agreements. Contact your local union representative for further information.
- For a collective bargaining claim, file a written grievance in accordance with the provisions of the Collective Bargaining Agreement; or
- Initiate an appeal to the Merit Systems Protection Board within 30 days of an appealable adverse action as defined in 5 C.F.R. §1201.3.
- Employees and applicants are encouraged to participate in information resolution processes available to address the reasonable accommodation outcome. The ADR process is outlined in VA Direction 5978: Alternative Dispute Resolution. Individuals may participate in ADR as part of the above avenues of redress or independently. If participation is independent of the above avenues of redress, it does not meet the requirements for filing claims under the aforementioned processes. If the employee believes she or he may also wish to pursue other avenues of redress, the employee should check with the appropriate EEO/Union/HR office to ensure that time requirements are met. Contact your local ADR Coordinator at http://www1.va.gov/adr/docs/ADR_Coordinators_List.pdf for further information.

Reconsideration, review, and the use of alternative resources does not affect the time limits for initiating statutory and collective-bargaining claims. Your participation in VA's informal alternative dispute resolution process will neither satisfy nor delay time restrictions of the formal processes indicated above..

DMO SIGNATURE

DATE

I (REQUESTOR) CERTIFY THAT I RECEIVED THIS FORM
REQUESTOR SIGNATURE

DATE

This form should be retained separately from the employee's Official Personnel Folder.