

Requests for accommodation should be submitted to the court not less than thirty (30) days before the proceeding for which the accommodation is requested. Specific case-related questions (e.g. postponements) should not be made on this form.



COURT OF APPEALS COURT OF SPECIAL APPEALS
 CIRCUIT COURT DISTRICT COURT OF MARYLAND FOR _____

City/County

Located at _____ Court Address

STATE OF MARYLAND
or

Case No. _____

Plaintiff/Petitioner vs. Defendant/Respondent

REQUEST FOR ACCOMMODATION FOR PERSON WITH DISABILITY

Requests for accommodation should be submitted to the court not less than thirty (30) days before the proceeding for which the accommodation is requested.

Name of person needing accommodation: _____

Name of person requesting accommodation (if different person): _____

Person needing accommodation is: Party Witness Juror Attorney Victim

Victim's Representative Other (Specify): _____

Applicant requests accommodation under Americans with Disabilities Act (ADA) as follows:

1. Type of court proceeding: Criminal Civil Traffic Juvenile Family Other (Specify): _____

2. Hearing/Trial date (if any): _____ Time: _____

3. Nature of disability or impairment (specify): _____

4. Type of accommodation(s) (be specific - a list of examples of accommodations is available at the clerk's office). If requesting sign language interpreter, specify type of sign language: _____

5. Please provide any further information that may assist the court in providing a reasonable accommodation (specify): _____

I request that this information be kept confidential to the extent allowed by law.

I certify that to the best of my knowledge this information is true and correct. I agree to provide medical documentation if required by the court.

Date Signature of Applicant/Applicant's Representative

Printed Name Telephone Number

Address City, State, Zip

Fax E-mail

The clerk's office and the ADA Coordinator are available to provide further assistance.