

**Wells College**  
**Office of Residence Life**  
**Housing Accommodation Request Form**

---

Wells College will make every reasonable effort to accommodate students with specific, reasonable needs in the residence halls. **This form serves as a starting point for a conversation** about your request; a Campus Life staff member will be in touch – please check your e-mail regularly.

Requests for any accommodation must be submitted as soon as possible upon admission for new students. Some accommodation requests require supplemental forms or additional documentation. After housing placements have been assigned, housing accommodations cannot be guaranteed.

- New incoming students should complete the application **as soon as possible** upon admission to Wells College. Accommodation requests submitted after July 1 may not be accommodated and cannot be guaranteed due to space and occupancy. Applications can be emailed to the Office of Residence Life at: [residencelife@wells.edu](mailto:residencelife@wells.edu).

All decisions regarding the following accommodations are made by the Director of Campus Life in collaboration with the Associate Director of Campus Life for Residence Life, and consultation from the Assistant Director of Student Success, if appropriate. Any appeals of decisions made should be brought to the Dean of Students. Please see the Appeals section of this application for more information.

**The following qualify as possible accommodations:**

Housing Exemption (Supplement Form: Housing Exemption Application)

All Wells College students are required to live in campus housing unless they (1) are or will be 22 years old or older by September 1 of the current academic year, (2) are a local resident, and have been for at least one year residing with parents or guardian at their permanent home address, (3) are married or live with a domestic partner, (4) are or have been in the military, have dependents you claim on tax forms. Other special circumstances will be addressed on a case-by-case basis.

Medical Accommodations (Supplemental Documentation Required)

Students requesting to live in a single room because of a medical accommodation will need to provide adequate documentation from a doctor verifying that the single room is a necessary accommodation. Medical singles are not guaranteed, especially after the Room Draw period is complete. If approved for a medical single for an ADA accommodation, the \$500 single room fee will be waived. If the accommodation does not fulfill ADA requirements, other accommodations can be given, such as priority placement. Priority placement is defined as being able to select a room (single (as available for the single fee) or double room with a requested roommate) before Housing Selection to ensure proper placement, or to be placed in a building or floor with private bathrooms, or other accommodations.

Appeals

If a student does not agree with the decision of the Director of Campus Life and Associate Director of Campus Life for Residence Life, the student may appeal to the Dean of Students. All appeals of housing

accommodations must be received in writing from the student within 5 (five) business days from the decision given to the student. In the appeal, the student should write a letter to the Dean of Students discussing why they asked for an accommodation, why they disagree with the decision made, and what they ideally are seeking in their accommodation. The Dean of Students will review all application material, the appeal letter, and make a decision within 5 business days of receiving the grievance letter.

### **Terms of Approval**

Housing Accommodation Requests must be submitted each academic year for each individual student. If approved for a specific academic year, the student will be approved for the entirety of the academic year for their specific accommodation.

If a student is seeking accommodations for subsequent years, the student must supply the Request Form and the necessary documentation with a new, specific, current letter from a medical professional each year they are requesting an accommodation.

Your request will be considered on an individual basis and may require a meeting with the Director of Campus Life, and/or the Assistant Director of Student Success in order to better assess your needs. It may be necessary for you to sign a release granting the Director of Campus Life permission to discuss your condition and how it affects you in the college environment with your medical provider each subsequent year.

### **DIRECTIONS FOR STUDENTS:**

1. Students must complete the Housing Accommodation Request Form, attach, and sign it.
2. Students must attach and submit supplemental forms, or note when and from whom supporting documentation (if applicable) will be provided.
3. Students must check their Wells College e-mail regularly for communication regarding their accommodation request. Failure to communicate in a timely fashion may result in the College's inability to meet the accommodation request.

# Housing Accommodation Request Form

*Any supplemental form or documentation can be attached to this form.*

Name: \_\_\_\_\_ / \_\_\_\_\_ Class Year: \_\_\_\_\_  
*Legal Preferred*

ID Number: \_\_\_\_\_

Please describe the accommodation requested: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please describe how your requested accommodation will benefit you as a student at Wells College:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



*By submitting this Housing Accommodation Request Form and all documentation needed, I agree that all the information included in this application is current and accurate, to the best of my knowledge. I agree to disclose my accommodation request to the appropriate parties, which include but are not limited to: the Director of Campus Life, the Dean of Students, and the Assistant Director of Student Success. I understand that in order to complete my request, all documentation or supplemental forms must be included, and even then, requests are not guaranteed. I give permission for the above mentioned professionals to contact my medical professional, if necessary, to gain more information about my accommodation request, and understand the information will only be used for my best interests. In signing this form, I also give the Director of Campus Life and the Dean of Students, if applicable, permission to view any current testing or medical documentation currently on file with the Office of Student Success.*

Student's signature: \_\_\_\_\_ Date: \_\_\_\_\_