## CHRIST ABOVE ALL BRYAN COLLEGE Office of Equity and Accessibility

## **ADA Grievance Form**

Please use this form to address concerns about the ADA accommodation that you are receiving. Because most grievances can be best addressed by the ADA Coordinator, you will submit this form to the ADA Coordinator. In cases where the grievance is against the ADA Coordinator themselves, you may additionally submit the form to the Provost.

Which of the following is the reason for submitting this form? (please check all that apply)

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I	I A faculty me	mber is not co	omnlving with	my approved	academic acco	mmodation
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A staff member is not complying with my approved academic accommodation.

A staff member is not complying with my approved non-academic accommodation.

	The ADA	Coordinator	has failed	l to foll	low the	existing	ADA	policies.
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I am requesting an exception to the existing ADA policies because I am in need of additional accommodation not currently covered.

Other

Give a full description of the problem along with all relevant facts: (additional sheets of paper may be attached)

List a summary of steps that you have already taken to attempt to resolve the issue:

List the requested resolution you are seeking:

Name: Signat	ture:

Date: \_\_\_\_\_ Bryan College Email: \_\_\_\_\_

Please attach any supporting documentation that you wish to share. This form can be delivered to the ADA Coordinator through one of the following means: ADA Coordinator Bryan College Box #7785 721 Bryan Drive Dayton, TN 37321 ADA@bryan.edu Fax: 423.775.7174