REQUEST FOR REASONABLE ACCOMMODATIONS

North Dakota Department of Transportation, Civil Rights
SFN 60135 (4-2026)

PART I

Complete all information in this section

Name			Telephone Number
Street/Mailing Address	City	State	ZIP Code
Preferred Method of Contact (select one) ◯ Day Phone ◯ Email ◯ USPS	Email Address		Date

Type of Event:

◯ Public Meeting/Public Hearing

◯ Training

◯ Other (specify) _____

Date of Event	and/or	Date Needed	Location of Event

PART II: LIMITED ENGLISH PROFICIENCY (LEP)

Check all boxes that apply to the type of language assistance that you are requesting.

◯ Yes ◯ No Do you need language assistance for LEP?

Language Assistance

☐ Oral Interpretation (specify language) _____

☐ Written Translation (specify language) _____

Name of Documents

PART III: AMERICANS WITH DISABILITIES ACT (ADA)

Check all boxes that apply to the accommodation(s) that you are requesting.

◯ Yes ◯ No Do you need an accommodation for a disability?

Types of Accommodation

☐ Interpreter for deaf (specify ASL, tactile, etc.)

☐ Assistive Listening device (specify)

☐ Physical location accessible for persons with a physical mobility impairment.

☐ Other (specify)

Nature of Disability (Medical documentation may be requested)

☐ Physical Mobility Impairment (specify) _____

☐ Speech Impairment (specify) _____

☐ Visual impairment (specify) _____

☐ Hearing Impairment (specify) _____

☐ Other (specify) _____

Alternative Format (Indicate first, second, third choice if possible.)

☐ Braille ☐ CD/Flash Drive _____

☐ Large Print (font point size) _____ ☐ Audio Recording -MP3 _____

☐ Other (specify) _____

Name of Documents	Date Needed

For Office Use Only

The accommodation request is:

◯ Granted as requested ◯ Granted with change - see additional information ◯ Denied - see additional information

NDDOT INSTRUCTIONS

General:

1. Requests for Reasonable Accommodations can be made by completing this form. If you prefer to complete this form electronically, go to the North Dakota Department of Transportation website at http://www.dot.nd.gov/forms/sfn60135.pdf

2. You may submit the completed form as follows:
   Save the completed form to your computer, click on the email link and attach your completed form.
   Email to: civilrights@nd.gov

   Mail to: NORTH DAKOTA DEPARTMENT OF TRANSPORTATION
   CIVIL RIGHTS DIVISION
   608 EAST BOULEVARD AVENUE
   BISMARCK ND 58505-0700

3. If you need assistance to complete the Request for Reasonable Accommodations form, please contact Heather Christianson, Civil Rights Division, NDDOT at telephone number (701) 328-2978 or by email at civilrights@nd.gov TTY users may use Relay North Dakota by calling 711 or 1-800-366-6888.

4. Appropriate provisions will be considered when the Department is notified at least 10 days prior to the meeting date or 15 days prior to the date the written comments or grant applications are due.
   - Requests should be made as soon as possible
   - Converting printed material may take several weeks.

5. The Civil Rights Division will contact you to discuss your request.