Agency Logo

Human Resources / Division / Unit

Sent via: email; mailing address

Date

Dear First Name:

This letter is in response to your request for an accommodation under the Americans with Disabilities Act (ADA). Our agency is committed to providing you the necessary tools to perform your position’s essential functions, with or without reasonable accommodation.

Your request was to be able to have a service animal (SA) allowed in the workplace.

Based on the information we received from you during the interactive process and medical documentation received, the agency approves the following accommodations:

* The ability to bring your Service Animal (SA) into the workplace, subject to the following:
  + SA must remain under your control at all times.
  + SA must be on a leash and with you at all times, unless the leash prevents your SA from performing the service for which it was trained.
  + SA must be current with its licenses and vaccinations and remains free of parasites, fleas, etc... The agency reserves the right to request proof that licenses and vaccinations are current.
  + It will remain your responsibility to take care of the SA and ensure its needs are met within designated breaks and lunch times (finding an appropriate place to relieve itself).
  + Work area must be kept clean and tidy.
  + Ensure the SA does not interfere with your work or with business operations.
  + Ensure the SA continues with any type of training it may still need.
  + This authorization is only in place for your current SA (Name of SA).

Please understand the agency has the obligation to ensure the safety of our employees and all those who come to our premises to deliver, obtain, and/or request services from our agency. Thus, any sign of aggression on the part of Name of SA towards anyone or other animals may result in the agency asking you to remove the service animal from the premises.

* Examples of aggression may include:
  + Biting or threatening to bite others (humans or animals).
  + Lunging at others (employees or visitors) while in the work premises;
  + Lunging at other animals while in the work premises;
  + Barking, growling, or snarling at others (humans or animals).
  + Displaying territorial dominant behavior anywhere in the premises.

Any incidents or near misses involving the service animal must be reported immediately to your supervisor.

If in the future, you transfer to another job within the agency or within the State, please let your new supervisor know about the existing accommodations the agency approved. Human Resources staff may need to re-engage with you, your new supervisor, and your health care provider to ascertain if the previous accommodations are still needed; whether they are an undue hardship for the agency; and/or what other accommodations can we explore.

The agency’s accommodation is based on information obtained during the interactive process, as well as our current ability to accommodate your request. Accommodations are not permanent and may be reassessed if your underlying health information changes and this accommodation is no longer effective, or if this accommodation becomes an undue hardship for our agency.

If your health condition should change in the future, please advise me or your manager immediately so modifications to your accommodation can be assessed.

The ADA path remains open and available to you. You are welcome to contact me at any time if you wish to reengage in the interactive process.

Your records will be maintained in accordance with applicable confidentiality requirements.

Sincerely,

HR staff member, Title

Human Resources, Agency

Cc: Supervisor, HRA