

## REQUEST FOR ADA ACCOMMODATION

BARBRI, Inc (“BARBRI”) complies with the Americans with Disabilities Act of 1990 (“ADA”), including the provision of appropriate auxiliary aids and services to students with disabilities to ensure effective communication. All requests for accommodation under the ADA must be in writing. To make a request, please complete this form and submit it:

- Via email to [ADARRequests@BARBRI.com](mailto:ADARRequests@BARBRI.com), Subject: ADA Accommodation.
- Via mail to BARBRI Bar Review, Attn: BARBRI ADA Manager, 1500 Broadway, Suite 808, New York, NY 10036.
- Via fax to 312-288-4607, Attn: ADA Accommodation.

With this form, please also provide **one** of the following:

1. A letter from the appropriate official at your law school or vocational rehabilitation agency documenting any auxiliary aid or service provided to you during law school, **or**
2. A doctor’s note or other medical documentation of your disability.

Upon receipt, BARBRI will contact you to confirm your accommodation or to gather additional information and/or documentation, if necessary. To ensure that BARBRI has ample time to review and accommodate your request, please return the completed form and supporting documentation at least 90 days prior to the course start date.

***Please write clearly and complete all blank fields. Incomplete or inadequate information and/or illegible handwriting may delay the eligibility review process.***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Exam State: \_\_\_\_\_ Exam Date: \_\_\_\_\_

Nature of Disability: \_\_\_\_\_

Accommodation Requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date of Request