



WASHINGTON DEPARTMENT OF FISH AND WILDLIFE

REASONABLE ACCOMMODATION - REQUEST FOR SERVICES

Mail to: WDFW, ADA Program, PO Box 43139, Olympia, WA 98501

Fax to: 360-902-2392

Applicant Information Required

Form with fields: LAST NAME, FIRST NAME, MIDDLE, SUFFIX, MAILING ADDRESS, PHYSICAL ADDRESS, CITY, STATE, ZIP, PHONE, SEX, HEIGHT, WEIGHT, DOB, SSN, WILD ID, EMAIL

Washington Department of Fish and Wildlife (WDFW) provides reasonable accommodations to persons with disabilities. If you need an accommodation for your disability, please fill out this application and return it to WDFW twenty (20) days prior to your activity date. There will be no cost to the person with a disability. WDFW will not reimburse any services contracted by the person with a disability. Mailing address is at the top of this application. Any further questions or assistance you may contact Civil Rights Coordinator at 360-902-2349 or Title6@dfw.wa.gov

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Type of Accommodation

Form with checkboxes: Vision Impaired, Hearing Impaired, Language, Other

Please explain the type of accommodation you will need:
Signature \_\_\_\_\_
Hunters Safety Class location \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_ AM PM

WDFW Official Use Below

Blank space for WDFW Official Use



## STATE OF WASHINGTON DEPARTMENT OF FISH AND WILDLIFE

Mailing Address: PO Box 43139 - Olympia, WA 98501 - (360) 902-2200, TDD (360) 902-2207  
Main Office Location: Natural Resources Building - 1111 Washington Street SE - Olympia, WA 98501

Dear applicant:

The Washington Department of Fish and Wildlife (WDFW) encourages all persons to experience recreation in Washington's wonderful outdoors. WDFW is committed to providing equal opportunity and access to all agency programs, activities, and facilities. WDFW will make every effort to satisfy requests made by persons with disabilities, provided the accommodation does not result in a fundamental alteration in the nature of the program, activity, or facility; does not create an undue financial or administrative burden; or does not constitute a violation of state or federal law.

For some accommodation requests, applicants may need to demonstrate the necessary physical or mental skills or abilities to safely and satisfactorily perform the activities for which the request is made. The request must be in writing and received by WDFW twenty (20) days prior to the accommodation need or activity. This notification is necessary to ensure the required arrangements are made available with no cost to the person with a disability.

Requests for accommodation will be reviewed by the appropriate Program Manager. Every effort will be made to meet the accommodation request. Applicants who are not reasonably satisfied with the outcome of their request may appeal to the Americans with Disabilities Act (ADA) Committee for further review. The WDFW ADA Committee will review the request for final agency response. The agency shall make every effort to respond at each step within 45 days of receipt of the request.

Please direct all questions concerning this form, ADA policies and procedures, or the status of a request or accommodation to the Civil Rights Coordinator at 360-902-2349 or by mail at:

Washington Department of Fish and Wildlife  
ADA Program  
PO Box 43139  
Olympia, WA 98501

Sincerely,

WDFW Civil Rights Coordinator