Request for ADA Structural Modification and Expenditures

To: Kelley Taylor, Chair
   Structural Modifications Committee
   Date Requested

From: Name: _____________________________ Department: ________________________________
   Campus Address:_____________________________________ Campus Phone:______________

The following request is made for modification to a campus building or structure. Requests should be made in order to improve access for individuals with disabilities on Auburn University’s campus. (Describe in detail modification(s) to be made, including building/street/area name and location):

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Rationale:____________________________________________________________________________
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Requested by:__________________________________

Signature  Print or type name

For committee use only:

Committee review:  ____________________________