

To Whom It May Concern:

Below is the Application for Accessibility Parking. This form must be filled out by both the requestor and a doctor. Please make sure your application includes the following:

1. A clear diagnosis of the disability/condition written by a medical professional.
2. Documentation of the disability must be current. (The age of the required documentation also may be dependent upon the nature of the disability and the specific requested accommodation.)
3. A statement of the functional impact and limitations of the disability in regards to mobility. If the permit is requested for medical appointments the frequency, location, and duration of the appointments must be cited by the doctor.
4. *A list of recommended parking accommodations with an explanation of its relation to the disability or condition.*
5. Please note parking in an accessible parking space is only permitted with a state issued placard

Please make sure that all of the required information above is included in your doctor's letter. If any information is unclear or missing, the permit timeline for a decision can increase. So, we ask that all information be included in the application to make the process as quick as possible. If you are an employee, the information should be emailed to the Office for Institutional Diversity at accommodation@bc.edu or call 617-552-2323. (All requests made by faculty and staff are reviewed by the Office for Institutional Diversity.)

Application for Accessibility Parking
Office of Auxiliary Services

Description of Patient's condition (Please attach another sheet of paper if needed):

Duration of Impairment:

- Permanent- Should obtain state HP placard
- Temporary- Expected duration: _____

Does this Person Require a

Wheelchair/Scooter?: Yes No

Please indicate the maximum distance that can be negotiated without endangering patient's health: (Circle one) <200 Ft. ~~200~~ 300 Ft. 400 Ft. ~~2~~ Blocks ~~3~~ Blocks >4 Blocks

Can the individual park in an outer lot and ride a transit system (that is fully accessible) with this condition? Yes No If no, explain: _____

Reason for doctor's visits: ~~Medical~~ • Physical Therapy