# Resource Center for Persons with Disabilities (RCPD)

***Maximizing Ability & Opportunity*Michigan State University Bessey Hall**

# 434 Farm Lane, #120 East Lansing, MI 48824-1033

**(517) 884-7273 (517) 355-1293 (TTY) (517) 432-3191 (fax)**

[**http://www.rcpd.msu.edu/**](http://www.rcpd.msu.edu/)



**AIR CONDITIONING IN UNIVERSITY HOUSING**

# Policy Statement

The University provides reasonable accommodations to housing residents with a documented disability.

1. **Approval Process for Air Conditioning**

A resident in University Housing with a disability that would be adversely affected without air conditioning (such as impacts to breathing or inability to regulate body temperature) must identify and register with the Resource Center for Persons with Disabilities (RCPD) in advance, at least 45 days before the air conditioning is needed and provide the following documentation:

* + 1. Treating professional completes the relevant disability documentation form located at <https://www.rcpd.msu.edu/documentation>
    2. Treating professional and resident complete the Air Conditioning Accommodation Request Form located at <https://www.rcpd.msu.edu/documentation>

*The University reserves the right to request additional clarification or documentation.*

The RCPD will validate the need for approved accommodations and work with the resident and campus officials to facilitate an effective outcome.

# Dispute Resolution Procedure

Disputes or disagreements about a disability determination, appropriateness of an accommodation, or service/assistance quality should first be raised with the RCPD specialist involved. If the matter cannot be resolved, a [dispute resolution](http://www.rcpd.msu.edu/awareness/dispute) should be submitted to RCPD.

Individuals may also file a written grievance with the University’s Deputy ADA Coordinator for Grievances:

**Deputy ADA Coordinator for Grievances Office of Institutional Equity**

4 Olds Hall East Lansing, MI 48824

Phone: (517) 353-3922

Email: [oie@msu.edu](mailto:oie@msu.edu).

**Student Information**

Name: Last, First, Middle Initial

Date of Birth: MSU NetID:

To be answered by student/resident, please describe the role air conditioning plays in mitigating aspects of your disability in university housing.

**Certifying Professional**

Certifying Professional’s Printed Name:

Credentials/Specialization:

License Type: License #: State: Exp. Date:

Diagnosis/Diagnoses that requires Air Conditioning:

DSM or ICD Codes:

Date of onset: Date of diagnosis:

Date of client’s last appointment? How often does the client receive treatment?

What symptoms/challenges continue to impact the clients daily functioning?

1. Is air conditioning a critical element of the current treatment plan you have developed with the resident? If yes, then how?
2. How does an air conditioner reduce or alleviate current symptoms and better manage the resident’s disability as listed above? Include the relationship or nexus between the client’s disability and the outcome provided by air conditioning

Please print this documentation, sign and date below. Send or fax directly to RCPD using the contact information on page one.

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**Certifying Professional’s Signature Date**