



Policy Name:	Residential Life Housing Accommodations Policy		
Associated Form(s):	1. Accommodation Intake Form through the Student Health Portal 2. Supporting Documentation for Housing Accommodation Request	Policy Number:	2024-24
Reviewed:	Non-Academic Policy Committee	Approved:	October 2, 2024
Approval Authority:	President <i>Susan L Parish</i>	Adopted:	October 7, 2024
Responsible Executive:	Vice President for Student Affairs	Revised:	November 30, 2023
Responsible Office:	Office of ACCESSibility	Contact:	Director of Accessibility

I. Introduction

In accordance with relevant federal and state disability laws Mercy University (the “University”) is committed to providing reasonable accommodations to ensure equal access for students who have qualifying disabilities, who have registered with the Office of ACCESSibility, and who choose to participate in the University’s Residential Life program. Students, as considered within this policy, also include students identified as “resident assistants.”

Residential Life housing accommodations vary based on the nature of a student’s disability. Each request for a Residential Life housing accommodation is considered on a case-by-case basis. Students who choose to participate in the University’s Residential Life program and wish to request related accommodations will need to follow the steps outlined in this Policy.

II. Preference Versus Need

The Office of Residential Life is committed to providing clean, healthy, and safe living environments for students that promote a positive community building experience and opportunities for learning outside of the classroom. Residential Life programs and services support the pedagogies of the University to develop students holistically, thus preparing them for success in a diverse world. Students who choose to participate in the University’s Residential Life program are committed to living in a communal environment which involves learning to share space and negotiate with fellow residents to ensure a respectful and inclusive experience. While the University will make every attempt to provide the housing accommodation the student requests, it cannot guarantee that it will provide the housing accommodation requested, nor does the University guarantee that the housing accommodation will be granted immediately. The University will make every effort to grant reasonable housing accommodation(s) in a timely fashion. Request for Residential Life housing accommodations based on a preference or desire for comfort rather than documented disability need will not be granted.

III. Procedures For Students Requesting Residential Life Housing Accommodations

For full consideration of any housing accommodation request, students must complete the Application for Accommodations with the Office of ACCESSibility for each semester they participate in the Residential Life program no later than July 15 (for the Fall term) and by December 15 (for the Spring semester). A request for Residential Life Accommodations may be submitted at any time during the academic year; however, the University encourages students to begin this process as soon as a Residential Life Housing accommodation is identified. Meeting the required deadlines will increase the ability of the University to review and promptly make a determination related to the requested accommodation. Approval of Residential Life housing accommodations occurs on a first-come, first-serve basis with rare exceptions as a result of documented extenuating circumstances. Accommodations are valid for the academic year in which the student is enrolled. Students who wish to maintain their Residential Life housing accommodations must submit a request annually.

Review Protocol

Each Residential Life housing accommodation request received is reviewed by the Residential Life Accommodations Committee (the “Committee”). The Committee is comprised of staff members from The Office of ACCESSibility, Residential Life, Health Office, and Student Counseling Center. The process for requesting housing accommodations under the Policy is as follows:

1. Student completes Housing Application with Residential Life;
2. Student registers with The Office of ACCESSibility in accordance with the *Student Accommodations Policy*;
3. Student submits a formal housing accommodation request via the Application for Accommodations on the Student Health Portal;
4. Student submits supporting documentation from a qualified professional under whom the student has a documented history of care or treatment which substantiates the need for the requested accommodation. The University considers a qualified professional a treatment provider with whom the student has an established relationship and who has expertise in the area of the relevant diagnosis that is the basis for the accommodation request. The student is required to use the University’s accommodation-specific forms when seeking input and documentation from the qualified provider. The qualified provider must complete the form in a manner that specifically addresses the request being made. Incomplete forms may delay or substantially impact the student’s request; therefore, students are encouraged to ensure the form is complete before submitting it to the University. For example: A student requesting a single room may provide documentation from their current physician or mental health provider that substantiates the presence of a condition or disability requiring the need for a single room as a reasonable alternative that supports a current treatment plan.

Students requesting the following specific Residential Life housing accommodations should contact The Office of ACCESSibility to obtain the appropriate form and related policy. Residential Life housing accommodation requests that require specific forms are:

1. Emotional Support Animal Requests
2. Meal Plan requests

Students are welcome to submit additional documentation to support their request, but it is not required if the form provides the information necessary. Additional documentation submitted should be consistent with the ACCESSibility Documentation Guidelines as outlined in the *Student Reasonable Accommodations Policy*.

Students must schedule and participate in an intake with The Office of ACCESSibility to ensure that an interactive process can occur that fully explores the student’s requested housing accommodation.

Within two (2) weeks of completing the steps outlined above, the Committee will review the student’s request and will make a determination. Determinations will be communicated via the

University's official email. The Office of ACCESSibility will work with Residential Life staff to ensure appropriate annotations are entered into the student's record. In the event the requested accommodation is not approved, the Committee will, when practicable, identify and/or provide an alternative reasonable accommodation.

Students that qualify for disability-related housing accommodations under Section 504 of the Rehabilitation Act of 1973 will receive any such accommodations without any additional housing charge. For example, students who are approved to receive a private bathroom due to their disability will not be charged a higher residence hall room rate solely because of the need to have the accommodation.

IV. Appeals

Students may appeal a determination of a request for an accommodation under this Policy by filing a complaint with the Director of Title IX/Equity Compliance. The Title IX /Equity Compliance Director, or a designee, will initially seek to mediate with the student and the Committee to address the concerns or appeal basis described in the complaint. If a mutually acceptable outcome is reached, the agreed upon housing accommodation will be implemented as soon as practicable.

If a mutually acceptable housing accommodation cannot be determined, the Title IX/Equity Compliance Director, or a designee, will initiate a review to determine if another outcome is appropriate under this Policy. The outcome of the review will lead to the Title IX/Equity Compliance Director making a recommendation to the Vice President of Student Affairs. The Vice President of Student Affairs, or their designee, will make the final determination specific to an appeal. This determination will be the final determination of the University.

V. Filing Complaints with the Office of Equity Compliance or Outside Agencies

Students who believe that a decision to deny the request for a reasonable accommodation or academic adjustment was based on unlawful discrimination may file a complaint with the Office of Equity Compliance [online](#) pursuant to the *Policy and Grievance Procedures on Non-Discrimination, Sex-Based Harassment and Sexual Violence*, or may avail themselves of any and all of their rights under law without fear of retaliation, including contacting one or more of the outside agencies listed below.

- [U.S. Department of Education, Office for Civil Rights](#)
- [U.S. Equal Employment Opportunity Commission](#)
- [New York State Division of Human Rights](#)
- [New York City Commission on Human Rights](#)
- [Westchester County Human Rights Commission](#)



Supporting Documentation for Housing Accommodation Request

Treating Provider:

Your patient is a student at Mercy University and has indicated they have a disability-related need for housing accommodations to have equal access to our Residential Life program. To consider this student's request accurately and equitably, Mercy University requires documentation from the student's treating provider who is thoroughly familiar with this student's condition and their functional limitations and/or restrictions. The treating provider filling out this form substantiating the need for the requested accommodation must be a qualified professional whose credentials demonstrate expertise in the respective field.

The information provided will be used to evaluate the request and help us to determine whether the accommodation is required for equal access. ***Please take the time to complete this form in its entirety.*** All information provided to us is kept confidential in accordance with the Family Educational Rights and Privacy Act (FERPA). A signed consent for release of information should be completed by the student prior to the release of this form. Thank you for your assistance.

Return Completed Form to The Office of ACCESSibility:

Email: accessibility@mercy.edu

Fax: (914) 674-7852

Mail: The Office of ACCESSibility

Mercy University

555 Broadway

Dobbs Ferry, New York 10522

If the spaces provided are not adequate, please attach a separate sheet of paper.

GENERAL INFORMATION

Student Name: _____

Requested _____

Accommodation: _____

DIAGNOSTIC INFORMATION

How long have you treated this student?

What was the date of your last appointment?

How often do you see the student?

Please describe the nature of the disability or diagnosis and include descriptions of the symptoms the student may experience related to this disability.

What factors improve and/or exacerbate this condition?

How frequently is the student affected by this condition?

Daily ☐ Weekly ☐ Monthly ☐ Seasonally ☐

Other (please specify): _____

Which daily activities are limited or impacted by the disability/ diagnosis? How are the activities limited by this condition?

How many days did the condition limit activities during the past year?

What specific symptoms impact the student's ability to function in the residence halls?

How will the student manage these symptoms in other campus settings? (ex: classrooms, dining halls, etc.)

What is the student's prognosis?

How long do you anticipate the student might need accommodated housing?

One semester ☐ one academic year ☐ more than one year ☐

What housing accommodations do you recommend for the student? Please explain.

If the requested accommodation is not feasible, what are alternative accommodations that could address the student's need?

	Yes	No
Would the student be able to live on campus and function effectively without the accommodation?	<input type="checkbox"/>	<input type="checkbox"/>

Can the student live on campus and take advantage of campus offerings without the accommodation?	<input type="checkbox"/>	<input type="checkbox"/>
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In the event of an emergency requiring evacuation, would the student need assistance?	<input type="checkbox"/>	<input type="checkbox"/>
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If yes, please explain.

PROVIDER INFORMATION:

Provider Signature: _____ Date: _____

Please affix business card here

Provider Name (print): _____

Title: _____

License or Certification #: _____

Field of expertise/ Specialization: _____

Address: _____

Phone: _____

Fax: _____