

## **ADA POLICY**

The University of Connecticut School of Medicine Graduate Medical Education Office(GME) and the Capital Area Health Consortium (CAHC) are committed to achieving equal educational opportunity and full participation for all residents. It is the policy that no qualified person, on the basis of discrimination, be excluded from participating in any program.

The Americans with Disabilities Act of 1990 (ADA) and accompanying regulations define a person with a disability as someone with a physical or mental impairment that substantially limits one or more major life activities such as walking, seeing, hearing, or learning. Further information can be obtained from the ADA website ([www.ada.gov](http://www.ada.gov)).

The Program Director, the GME office and the CAHC will work with a resident in the development and implementation of reasonable accommodations for a disability as defined in the Americans with Disabilities Act. It is the responsibility of a resident to communicate directly with the program director and request accommodations prior to starting the training program. Documentation and additional testing may be required to validate that the individual is covered under the Americans with Disabilities Act as a disabled individual.

Reasonable accommodations, when necessary, will be made for current and future activities, but cannot be made retroactively to remove remediation, probation or termination.

While the use of accommodations may enable the resident to better demonstrate his/her abilities, accommodations do not guarantee improved performance.

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I have read the above and understand the position of the University of Connecticut School of Medicine Graduate Medical Education Office and the Capital Area Health Consortium, as well as my responsibility to request reasonable accommodations from my program director. I understand that the program director may be required to provide the request to the GME office and CAHC to approve and implement the appropriate accommodation.

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PRINT NAME

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PROGRAM

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SIGNATURE

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DATE