Jefferson County

Human Resources Department/Equity & Inclusion Division



Authorization for Limited Release of Medical Information for Reasonable Accommodation Form

I, (Employee), authorize (Medical Provider) to release medical information or records to my Employer that are needed to assess my reasonable accommodation request. I understand that the information that my Employer is attempting to obtain will be limited to:	
 Confirmation of a disability as defined under the Americans with Disabilities Act (ADA); The functional limitation(s) or work-related restrictions associated with the stated disability (including any need for leave); and Why the reasonable accommodation is needed. 	
I understand that the information collected and discussed is to be treated confidentially and may only be obtained and used consistent with equal employment opportunity laws including the ADA. However, relevant information may be shared with supervisors and managers regarding necessary restrictions on the work or duties of an employee and necessary accommodations; first aid and safety personnel, when appropriate, if the disability might require emergency treatment; and government officials investigating compliance with equal employment opportunity laws when relevant and on request.	
This release terminates ninety (90) days after the date of signature below:	
Employee Signature:	Date:
Witness Signature:	Date:
Employee Name:	Date:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. "Genetic information," as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual or family member receiving assistive reproductive services.