

Pregnancy and /or Lactation Accommodation Request Form

This form is to be used by any Rutgers University employee who would like to request a pregnancy and/or lactation accommodation. Information provided to OEE will be maintained in confidence and divulged only to the extent necessary. Medical records are confidential and maintained with OEE. Medical records pertaining to this accommodation request should not be submitted to your department and are not maintained in departmental files.

This form may also be completed via the **UHR Service Portal**(<https://rutgers.service-now.com/hrportal>) or emailed (employmentequity@hr.rutgers.edu) or faxed (732-932-0049)

Name:	NetID:
Preferred Email:	Preferred Phone Number:
Status:	Staff Faculty Applicant Other
Supervisor Name:	

If applicable, please provide your estimated due date:

If applicable, please explain how your pregnancy affects your ability to perform your job duties and responsibilities:

If applicable, briefly describe the accommodation(s) you are requesting that will enable you to perform those job duties or responsibilities identified above as being restricted or limited due to your pregnancy

If requesting a lactation break, please indicate how many breaks you require each day and the duration of each break:

If requesting a lactation break, do you need assistance finding a private space to take your break? Yes No

How long do you anticipate the need for the accommodation(s) you are requesting? Please provide anticipated start and end dates:

Signed:

Date:

Depending on the nature of your responses above, OEE may require you to submit a completed Medical Inquiry Form to support your request. In order to expedite the processing of your request, if you have a completed Medical Inquiry Form, you are encouraged to submit it simultaneously with this Accommodation Request Form.