



Natural Resources Conservation Service
Civil Rights Division
5601 Sunnyside Avenue
Room 1-1102B, Mail Stop 5472
Beltsville, Maryland 20705

AUTHORIZATION TO RELEASE MEDICAL RECORDS AND INFORMATION

I, _____, hereby authorize my health care provider(s) to release any and all medical information and/or records in their possession concerning only those matters directly related to the disability for which I am requesting a reasonable accommodation, to Cliff Denshire NRCS Disability Emphasis Program Manager, 5601 Sunnyside Avenue, Bldg. 1-1102 B, Mailstop 5472, Beltsville, MD. 20705-5472.

Medical documentation may be reviewed in consultation with O.I. Jacykewycz, M.D., Medical Officer, Department of Agriculture, to determine if your medical condition can be considered a disability under the Rehabilitation Act (Rehab. Act) of 1973 as amended and the Americans with Disabilities Act (ADA) of 1990. As defined in the Rehab. Act a person with a disability is one who: has a physical or mental impairment which substantially limits one or more of such person's major life activities, (2) has a record of such an impairment, or (3) is regarded as having such an impairment.

In granting this permission it is understood that this medical documentation will be utilized for official purposes only, treated in a confidential manner, and reviewed only by individuals who are qualified to assist in interpreting it for the purpose of making administrative decisions regarding possible accommodation efforts.

In accordance with NRCS confidentiality policy, the NRCS DEPM will maintain all records created during the processing of a reasonable accommodation request. Supervisors and Managers who need to know may be told about the determination of eligibility of an individual with a disability, the necessary restrictions and the work or duties of the employee and about any recommended accommodations. Medical information should only be disclosed if strictly necessary.

Name of health care provider: _____

Address: _____

Telephone: _____

Date

Signature