

# Confidential Voluntary Self-Identification of Disability

#### **Purpose:**

In accordance with § 2.2-203.2:3, the (insert Agency Name) is committed to hiring, promoting and ensuring equal opportunity to qualified people with disabilities. To improve our efforts and better assist our employees with disabilities, we are requesting that you voluntarily provide information regarding a physical or mental disability as defined by the Americans with Disabilities Act (ADA)<sup>1</sup>

All Personal Health Information is confidential and is retained in the Commonwealth's secured Human Resources Information System as well as, in your official personnel record with limited disclosure to authorized individuals in Human Resources. As Personal Health Information is subject to change, employees may be asked to update this information periodically or as needed.

### Disability as Defined by the Americans with Disabilities Act:

- (1) A person who has a physical or mental impairment<sup>2</sup> that substantially limits one or more major life activities<sup>3</sup>
- (2) A person with a record of a physical or mental impairment that substantially limits one or more major life activities; and
- (3) A person who is regarded as having a physical or mental impairment that substantially limits one or more major life activities.

### **Requests for Reasonable Accommodation**

Please inform (insert designated Agency Point of Contact) if you require reasonable accommodation to perform essential job functions. Agency management, including Human Resources will engage in an interactive process with you and your treating medical practitioner as needed to determine what or if reasonable accommodations can be provided.

## **Voluntary Disclosure:** Please check one of the selections below and sign where indicated, and return to Human Resources

Employee Signature		Date
	I choose not to respond	
	No, I do not have a disability	
	Yes, I have a disability	

<sup>&</sup>lt;sup>1</sup> For more information on the Americans with Disabilities Act, visit https://www.dol.gov/general/topic/disability/ada

<sup>&</sup>lt;sup>2</sup> **Impairment** may include deafness, blindness, intellectual disability, mobility impairments, cancer, diabetes, epilepsy, major depressive disorder, bipolar disorder, post-traumatic disorder, HIV infection, multiple sclerosis, etc.

<sup>&</sup>lt;sup>3</sup> Major Life Activities may include caring for oneself, seeing, hearing, walking/standing, lifting, breathing, speaking, learning, concentrating/thinking, and operation of major bodily functions to include the respiratory, immune, neurological, circulatory, cardiovascular, digestive, bowel, bladder, endocrine, hemic, lymphatic, musculoskeletal, etc.