

**THURSTON COUNTY SUPERIOR COURT**  
**Request for Reasonable Accommodation**

1. Case No.: \_\_\_\_\_ Date: \_\_\_\_\_

Case Name: \_\_\_\_\_

2. Name of Person Requesting: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
(mailing address) (area code, phone number)

3. I am participating in a court proceeding/activity as a (check all that apply):  
 Petitioner/Plaintiff       Defendant/Respondent       Attorney  
 Witness       Juror       Judicial Officer  
 Other (Specify interest in or connection to proceeding, in any)  
\_\_\_\_\_

4. List all known dates/times the accommodations(s) are needed (specify):  
\_\_\_\_\_  
\_\_\_\_\_

5. Why is an accommodation needed?  
\_\_\_\_\_

6. What accommodation would you like? And why?  
\_\_\_\_\_  
\_\_\_\_\_

7. Please provide any information that would help the court respond to your request.  
\_\_\_\_\_  
\_\_\_\_\_

8. How do you want to be informed of the status of your request for accommodation?  
 Phone     Writing     Email     In person     Other (specify) \_\_\_\_\_

I declare under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Date: \_\_\_\_\_ at \_\_\_\_\_ (City, State)

\_\_\_\_\_  
(Type or Print Name of Person Requesting) (Signature of Person Requesting)

**Send this form to the Court Administrator at**  
**2000 Lakeridge Drive SW, Building 2; Olympia, WA 98502**  
**You can mail it, send it in person, or e-mail**  
**[AccessibilitySuperiorCourt@co.thurston.wa.us](mailto:AccessibilitySuperiorCourt@co.thurston.wa.us)**