

Voluntary Action Center of Northern Illinois
ADA Reasonable Modification Request Form

Requests for modifications of Voluntary Action Center’s policies, practices, or procedures to accommodate an individual with a disability may be made either in advance or at the time of the transportation service. Whenever feasible, requests for reasonable modifications shall be made and determined in advance. A reasonable modification related to the ADA Paratransit is a change or exception to a policy, practice, or procedure that allows people with disabilities to have equal access to transportation. Fill out this form with details about your modification request and how it relates to your disability.

Modification Requested By:	
Date:	
Phone Number:	
Address:	
Email:	
Modification for (self, name of ADA Rider):	
Date of trip for modification:	
Based on your (or designated passenger’s) disability, why is the modification necessary?	
Describe your modification request for ADA demand-response transportation?	

Signature of ADA Passenger or Guardian

Date

Once completed, please mail or email this form to:

Voluntary Action Center of Northern Illinois
c/o Reasonable Modification
1606 Bethany Road
Sycamore, IL 60178
Email: info@vacdk.com

To request a modification by phone, please call the following numbers, depending on your location:

- TransVAC/MedVAC – 1606 Bethany Road Sycamore, IL 60178
(Sycamore office) (815) 758-6641
- TransVAC/MedVAC – 1406 Suydam Road Sandwich, IL 60548
(Sandwich office) (815) 786-9404
- Kendall Area Transit – 109 W. Ridge Street Yorkville, IL 60560
(630) 882-6970

Requests for reasonable modifications may be denied on the following grounds:

1. A fundamental alteration to the nature of the program, service, or activity,
2. A direct threat to the health or safety of others,
3. A not needed by the requester to use the service, or
4. An undue financial / administrative burden.

VAC will strive to acknowledge and approve or deny requests within three (3) business days of receipt. All riders who are denied a request have the ability to appeal. For a copy of our Appeals Form and the complete Reasonable Modification Policy, please visit www.vacdk.com.

All information is kept confidential. All materials are available in accessible format and in languages other than English upon request.

For Office Use Only			
Received Date:	Responded Date:	Approved/Denied:	Signature:
Notes regarding decision:			