

ARIZONA STATE HUMAN RESOURCES DIVISION
100 N. 15th Avenue, #261
Phoenix, AZ 85007

Request for Disability Preference

In accordance with A.R.S. 38-492, an **INDIVIDUAL WITH A DISABILITY** who indicates interest in employment with Agencies served by the State Human Resources Division shall be given preference.

For the purpose of this preference, **INDIVIDUAL WITH A DISABILITY** means anyone who has a physical or mental impairment, which substantially limits one or more of his/her major life functions, or has a record of such impairment or is regarded as having such impairment.

Preference will be awarded **ONLY** upon receipt of this signed and dated "Request for Disability Preference" form. The completed form is intended for use solely in connection with A.R.S. 38-492. The information is requested on a voluntary basis and will be kept confidential. Refusal to provide the requested information will not result in any adverse treatment.

Requests for reasonable accommodation in the interview/testing process should be made directly to the hiring agency when they contact you.

Once you have completed this form, click the submit button to attach it to an email to be sent to the Human Resources HRIS Help Desk. You may also print the form and fax it to 602.542.2084.

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I hereby request preference. I affirm/certify that I meet the above definition of an INDIVIDUAL WITH A DISABILITY, and am eligible for preference.

Name: _____
Last Name First Name M.I.

Address: _____

City State Zip Code

Phone: _____
Home Work

Signature (If submitting electronically, type your name in the box to certify that you are eligible to request preference)

Date

Submit by Email