



EFFECTIVE COMMUNICATION REQUEST FORM

Use this form to request auxiliary aids and services for effective communication during programs and services offered by the Georgia Department of Natural Resources. Please note: The department needs as much advanced notice as possible to ensure that reasonable accommodations are met. Reasonable efforts will be made to accommodate requests made less than 48 hours in advance of a scheduled program, activity or event.

Date of request: _____

Request Type: *(Please check all that apply)*

- Assistive Listening Aid or Service
- Assistive Vision Aid or Service
- Assistive Speech Aid or Service
- Other _____

Contact Persons:	Name	Email, Phone or Website (preferred communication)
Individual Making Request		
DNR Division (Location of Event, Program or Service)		
Event Contact Person		

*Please attach any relevant supporting information (i.e., event flyer or brochure).

Event Details:	
Event Name:	
Event Date:	
Event Start & End Time:	
Event Description:	
Event Location:	
Other Relevant Details:	