

**Oregon Judicial Department Request for Expression of Milk Accommodation
Uniform Trial Court Rule 7.090**

****Requests for accommodations should be made as soon as possible.****

A. CONTACTS

1. Date of Request: _____
2. Name of person requesting accommodation (Applicant): _____
Contact Name: _____ Relation to Applicant: _____
Mailing Address: _____
Phone No.: _____ Email Address: _____
TTY: _____ Fax No.: _____
Please list preferred contact method (Email, Phone, etc.): _____
3. Name and location of the circuit court or Oregon Judicial Department (OJD) office that provides the services, programs, or materials you want to use: _____

❖ Need help locating the name and location of the court or OJD Office?

Click here → [Court Information Finder](#) for Circuit Courts

Click here for → [Supreme Court](#) Click here for → [Court of Appeals](#) Click here for → [Tax Court](#)

Click here for Administration → [Office of the State Court Administrator](#)

You may also call the State Court Administrator's Office at 503-986-5500 for assistance in locating the name, location, and contact information for the court or OJD office.

❖ Submittal:

You may print this form, fill it out, and submit it in person, by fax, or by US Mail to the local ADA Coordinator for the location. Click on the following link to access the ADA Coordinator list and contact information [ADA Coordinator](#). You may also call the court or OJD office for the name and contact information of the ADA Coordinator.

B. OTHER INFORMATION

1. Case No. and type of case (*if known*): _____
2. Date, time, and estimated length of the date of proceeding, program, service, or event (*if known*):

3. Person's status in the proceeding, if applicable (*e.g., party, witness, juror, lawyer*):

4. Describe the nature of the proceeding, program, service, or event (e.g., hearing, trial, jury service, mediation, meeting): _____

5. Is the proceeding scheduled to be conducted in person at the courthouse or by remote means? (If by remote means, please list the type of means (e.g., by telephone, Webex, particular mode of video conference, etc.):

6. What type of accommodation do you need and prefer:

Uniform Trial Court Rule 7.090 requires parties in cases to make the request in writing and as soon as practicable.

C. FOR COURT / OJD OFFICE USE ONLY

Response to Request for Milk Expression Accommodation:

1. The above request is granted: from _____ to _____
 for an indefinite period
 in whole as follows (specify the accommodations): _____
 in part. As agreed to by the applicant, alternative accommodations are as follows (specify the accommodations):

2. The court is unable to accommodate the above request at this time because:
 the request for creates an undue financial or administrative burden on the court or the OJD office.
 the request fundamentally alters (changes) the nature of the service, program, or event.
 the court needs more information. Please contact the local ADA Coordinator at:

other: _____

Signed by: _____ Date: _____

Name/Title: _____