MEDICAL RELEASE

Requestor's Name	
I hereby authorize the installation to keep and maintain the part of my request for reasonable accommodation in accor	
(a) Supporting medical documentation obtained in accommodation process must be kept confidential. Such i including information about functional limitations and reakept in a secured file separate from the supervisor's employable labeled Personal Data Privacy Act 1974 Reasonab who obtains or receives such information is strictly bound	nformation and documentation, sonable accommodation needs, will be byee work folder (971). The folder le Accommodation. Any employee
(b) Records will be maintained in accordance with requirements of 29 CFR Section 1611, <i>Privacy Act Regula</i> Opportunity Commission Order 150.003, <i>Procedures for Accommodations for Individuals with Disabilities</i> , and apprinformation may only be disclosed to:	ntions, the Equal Employment Providing Reasonable
(1) Supervisors, managers and personnel sy told about necessary restrictions concerning the work or do about the necessary accommodations, but medical informations consent of the employee in accordance with the <i>Privacy A</i>	uties of the employee or applicant and ation will not be disclosed without
(2) First aid and safety personnel may be in disability might require emergency treatment.	nformed when appropriate, if the
(3) Government officials, as necessary, to a Rehabilitation Act and/or defend the agency against a claim	-
(4) The Workers' Compensation offices in of Personnel Management in connection with disability re	
(5) The Occupational Medicine Services F	light of the installation.
Requestor Date	
Requestor	