



### **Voluntary Inclement Weather Questionnaire**

This purpose of this form is to provide information regarding path of travel on and around campus for students with mobility impairments who will be significantly affected by snow and ice. SDS will provide the information on this form to the ADA Coordinator in Facilities Management to coordinate snow removal with Grounds Maintenance. Timely snow removal is continual challenge in the winter. This process is an effort to address your individual travel challenges.

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Net ID: \_\_\_\_\_

Daytime Phone No.: \_\_\_\_\_ Evening Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

Form of travel: Auto \_\_\_\_\_ TCAT bus \_\_\_\_\_ CULift \_\_\_\_\_

Campus Parking Location: \_\_\_\_\_

Specific need(s) for getting to and from these locations: (e.g. snow/ice removal, etc.) \_\_\_\_\_

---

---

---

---

---

---

---

---

To help better identify snow and ice removal needs, please list below during the paths of travel you will use at specific times for most weeks throughout the semester.

	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>
7:30 AM					
8:00					
9:00					
10:00					
11:00					
12:00 PM					
1:00					
2:00					
3:00					
4:00					
5:00					
6:00					
7:00					
8:00					
9:00					