



Reasonable Accommodation Request Form

Date:
Name:
Phone Number:
Address:
Description of Request:
Service and/or Location:
Are you able to ride without this accommodation?

Please complete this form to request a reasonable accommodation from Middle Kentucky Transit.

Submit the completed form to the following:

Email: mkhroffice@mkcap.org

Fax: (606) 666-9780

Mail: **Middle Kentucky CAP, Inc.**

171 Howell Heights

Jackson, KY 41339

Attn: Ashley Slone