ICT Accessibility Exception Request

Purpose

In accordance with the UNR Information and Communication Technology (ICT) Accessibility Policy and the UNR ICT Purchasing Procedure, the University procures Information and Communication Technology (ICT) that is universal in design and accessible to individuals with disabilities. In some instances, ICT may be eligible for exception from this policy when approved by the ICT Accessibility Committee. Situations may include technically infeasible, undue burden, fundamental alteration, no accessible alternative, and others and are evaluated on an individual basis. The justification for such exception must be in writing and must be based upon a need for some feature or characteristic (specification) that is unique to the requested product or service that cannot be provided accessibly by any other product or service without imposing undue burden or fundamental alteration.

Definitions

1 Technically infeasible. If something has little likelihood of being accessible because there is no existing software and/or hardware solution to provide the same level of access to all persons it is technically infeasible.

2 Undue burden. Compliance is a financial hardship, or is significantly difficult in that it may require extraordinary measures due to the nature or intent of the Information and Communication Technology. Financial hardship is determined within the context of the entire University budget.
Instructions

Exception approval from the ICT Accessibility Committee is required before the procurement can commence. The ICT Accessibility Exception Request form must contain the following elements:

1. An explanation of the basis for the exception.
2. A reason and research indicating why a competitor’s product is not satisfactory.
3. An accounting of the small number of expected consumers of the product or service.
4. Specific evidence of vendor commitment to explore modification to improve accessibility.
5. An approved Equally Effective Alternative Access Plan (EEAAP) in place at the time of the exception request.

Forward the complete, signed packet to the ICT Software Accessibility Review Committee for consideration;

Electronic (scanned) copy to: eit_sw_review@lists.unr.edu

OR

Paper copy to:

ICT Software Accessibility Review Committee
c/o Coordinator of Assistive Technology, Admissions & Records
MS0120
ICT ACCESSIBILITY EXCEPTION REQUEST FORM

Contact Information

Your Name: ________________________________

Your UNR Email Address: ________________________________

ICT Product Name & Version: ________________________________

ICT Product Information

1. Basis for Exception: This explanation must address the critical importance of the unique specifications to the intended use of the product or service and provide evidence that the product or service cannot be provided accessibly without imposing undue burden or fundamental alteration.
ICT Product Name & Version: ____________________________________________

2. A reason stating why a competitor’s product is not satisfactory. This section must relate to the explanation of need for the unique specifications and should serve to support a finding that the stated need cannot be met accessibly with competing products. Sufficient detail must be included to show that the marketplace has been canvassed to locate accessible competitive products. Include substantiating data such as: companies contacted and the results of an accessibility inquiry, etc. Since this is a request to depart from providing products and services that are accessible to all individuals, including those with disabilities, a request without support cannot be considered.
ICT Product Name & Version: ____________________________________________

3. An accounting of the small number of expected consumers of the product or service. List specific names, titles, or classifications of constituents who will use this product or service, including total number of each classification.

4. Specific evidence of vendor commitment to explore modification to improve accessibility. Attach a written statement from the vendor. This can be in the form of an email or the vendor’s product development roadmap indicating pending accessibility modifications.

Requires Attachment

5. An approved Equally Effective Alternative Access Plan (EEAAP) in place at the time of the exception request.

Requires Attachment
ICT Product Name & Version:__________________________________________________________

Approvals

1. Requesting Department Representative

   Name and Title:______________________________________________________________

   Signature:____________________  Date:____________________

2. Administrative Approvals

   Department Chair/Manager

   Name and Title:______________________________________________________________

   Signature:____________________  Date:____________________

   Dean/Division Vice President

   Name and Title:______________________________________________________________

   Signature:____________________  Date:____________________

3. ICT Accessibility Committee Approvals

   ICT Exception Committee Representative

   Name and Title:______________________________________________________________

   Signature:____________________  Date:____________________

   ICT Committee Chair/Vice-Chair

   Name and Title:______________________________________________________________

   Signature:____________________  Date:____________________