

**DECISION OF JOINT FOREMEN'S LABOR RELATIONS COMMITTEE CONCERNING  
EMPLOYEE/APPLICANT REQUEST FOR REASONABLE ACCOMMODATION PURSUANT  
TO PCWB&FA ACCOMMODATION POLICY**

Date:  
Port:  
Applicant/Employee Name:  
Address:  
Registration Number:  
Local:  
Date of Request for Accommodation:  
Nature of Accommodation Requested:

Pursuant to the Pacific Coast Walking Bosses & Foremen Agreement (PCWB&FA) Policy on ADA Compliance and Reasonable Accommodation (the "Policy"), the Joint Foremen's Labor Relations Committee (JFLRC) has carefully considered your accommodation request and report of the Joint Area Medical Specialist. The JFLRC makes the following decision:

- Grant the requested accommodation.
- Deny the requested accommodation.
- Other (explain).

The JFLRC has reached this decision in accordance with the Policy after engaging in a good faith interactive process with you. Attached is your written request for accommodation, as well as copies of all documentation and/or information that you provided to the JFLRC during the interactive process in support of the request.

(check if appropriate)

- continued -

Also attached to this referral is a copy of the written report prepared by Dr. \_\_\_\_\_, the Medical Specialist designated in the Port to render opinions to the JFLRC under the Policy.

The JFLRC's reasons for this decision are as follows:

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This response assumes that your ability to safely and efficiently perform PCWB&FA job functions has not changed since the report of the Joint Area Medical Specialist. If that is not the case, please promptly advise the JFLRC. Should follow-up be required, please submit a new accommodation request.

No appeal may be taken from the JFLRC's decision addressing your request. Nothing in this letter or the handling of your request shall be construed as an admission by the PMA and its members, and/or the ILWU and its local affiliates, or as evidence that you are disabled within the meaning of the Americans with Disabilities' Act or any state or local law, or that PMA and its members, and/or the ILWU and its local affiliates regard you as disabled, or that you have a record of a disability under the ADA or any law, federal, state or local.

Very truly yours,

PCWB&FA  
JOINT FOREMEN'S LABOR RELATIONS COMMITTEE

For the Union:

For the Employers:

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Enclosures  
*[Dated Letter from Area Medical Specialist]*