



Housing Accessibility in Technion Dormitories

Last name: _____ First name: _____

Gender: Male / Female Cell phone: _____

Type of dormitory that you have been assigned: _____

Type of accessibility needed:

- ☐ Accessible apartment
- ☐ Accessible apartment for me and a caretaker
- ☐ Accessible parking
- ☐ Accessibility in receiving the key
- ☐ Accessibility in returning the room/apartment key
- ☐ Other (explain):
