APPLICATION FOR ACCOMMODATIONS AND SERVICES

Name: ___________________________  Student ID #: ____________________

Please indicate below the accommodations or services you are requesting. Accommodations are those provisions which are addressed under the requirements of the Americans with Disabilities Act of 1990. Services are provisions which are made above and beyond required accommodations. Note that the request of an accommodation or service does not guarantee its delivery. Provision of accommodations will be contingent upon appropriate documentation of a disability. Provision of services will be contingent upon availability of resources associated with said service.

ACCOMMODATIONS:

□ extended time for exams
□ reader for exams
□ isolated test administration
□ objective exams, when possible
□ essay exams, when possible
□ oral exams, when possible
□ extended time for in-class assignments
□ taped lectures
□ note taker
□ taped textbooks
□ professor facing class: remaining in student’s eyesight range
□ sign language interpretation
□ preferential seating
□ other: ______________________________

SERVICES:

□ individualized peer tutoring *

*Contingent upon availability of qualified tutors

______________________________________________  _________________________
Student’s Signature  Date

To receive disability services, you must provide documentation to the Office of Student Disability and Support Services. We encourage you to contact this office as soon as possible so that the needed accommodations can be addressed in a timely manner. To make an appointment, please call (304) 929.5005.