 AGREEMENT FOR ACCOMMODATIONS

Student’s ID number: ____________________________________________________

Instructor: _____________________________________________________________

Course Name: ___________________________________________________________

Course Number: ___________________________________________________________

Instructor Preferred Phone: _______________________________________________

Student is eligible for the following classroom accommodations:

☐ Access to teacher handouts, slides, overheads
☐ Additional time on in-class writing assignments
☐ Assistive listening device (ALD):
☐ Assistive Technology (laptop, note-taking device)
☐ Closed Captioned Videos
☐ Information on board read aloud for students with visual disabilities
☐ Interpreting/ Transcribing
☐ Leave classroom when symptoms occur
☐ Note taker
☐ Occasional exceptions to the absentee/tardiness policy
☐ Personal Care Attendant
☐ Preferential Seating
☐ Record Lectures
☐ Other __________________________________________

Student is eligible for the following testing accommodations:

☐ Additional Time
☐ Alternate exam dates during periods of heavy scheduling
☐ Alternative testing environment
☐ Assistive Technology
☐ Calculator
☐ Scribe
☐ Spell-check or points not taken off for spelling
☐ Other ______________________________

Student is eligible for the following online course accommodations:

☐ My Reader
☐ Eye-Pal
☐ Inspiration
☐ Kurzweil 1000
☐ Dolphin Supernova
☐ Read & Write Gold

Student is not eligible for accommodation due to and explanation:

______________________________________________________________

______________________________________________________________

Director of Educational Access Team Signature: __________________________

Instructor Signature: ________________________________________________

Student Signature: _________________________________________________

Date: ________________________________