



Student Information

Today's Date: _____ Requesting Disability Services for: Fall Spring Summer Year _____

Name: _____

Date of Birth: _____ Student ID# _____

Address: _____

Email: _____ Phone: _____

Place of employment, type of job, work schedule, and number hours per week: _____

Evaluation

Fill out to the best of your ability.

Degree Plan/Major: _____ Classification: Freshman Sophomore

1st semester at ASU Mid-South: _____ No. hrs. completed at ASU Mid-South: _____

Current GPA at ASU Mid-South: _____ Overall GPA at ASU Mid-South: _____

High school attended: _____ Approximate high school GPA: _____

Other colleges and what years attended _____

Assistance

I might need assistance (not necessarily accommodations) with these topics:

___ Time management

___ Study skills (list):

___ Note-taking

___ Computer use

___ Essay writing (especially for tests)

___ Test-taking or test anxiety

___ Strategies for handling or understanding own disability

___ Knowing how to explain disability to instructors

___ Understanding terminology/procedures in disability accommodation process

___ Special testing/evaluation available at ASU Mid-South e.g. ACCUPLACER, Success Navigator, Learning Style Evaluations, Career Guidance, etc.

Disability Information

Student's own description of disability, including how it affects learning and the classroom experience, and how the student copes:

The category of disability, as based on the student's self-report and/or documentation:
(Indicate whether by student's self-report (S) or attached documentation (D).)

____ ADD/ADHD

____ Deaf/Hard of Hearing

____ Mental Retardation

____ Speech/Language Disorders

____ Behavioral/Psychological Disorders

____ Head Injuries

____ Neurological Disorder

____ Visual Impairment or Blindness

____ Chronic Illnesses

____ Learning Disabilities

____ Orthopedic/Mobility Disabilities

Other: _____

Accommodations Requested

All accommodations requested by the student are listed.

Important Reminder: Accommodations relating to specific, documented disabilities are reviewed and approved/denied dependent on requirements for classes of a particular semester. The student may also need to submit additional documents, including a course syllabus or related handouts detailing course or project expectations, so that appropriate and reasonable accommodations can be determined.

Comments/Observations, including any helpful comments from the student: _____

I have reviewed the information stated in this registration form and know it to be true to the best of my ability.

Student Signature: _____

Student Acknowledgment of Rights and Responsibilities

Name: _____ Date _____

I have met with the Director of Disability Services, and my signature below indicates that I understand the following statements. (Check after reviewing each item.)

- I cannot receive accommodations until I have provided appropriate documentation
- Not all disabilities qualify for accommodations in the college setting. Accommodations must be approved and must be relevant to the specific disability.
- Students with different disabilities receive different accommodations.
- I must provide reasonably recent (less than three years old) documentation/evaluation of my disability, completed by a qualified evaluator.
- Instructors whose classes I take will be informed of my approved accommodations. They will not receive copies of the supporting documentation which I have provided.
- My instructors and I will receive a copy of the notification by email.
- If my instructors need guidance in how to help me, they may consult with the Director of Disability Services.
- I have student responsibilities which are outlined in each course syllabus. I understand that I must adhere to those standards.
- Excessive absences from class are generally not a reasonable accommodation.
- When necessary, and so that they can help me more effectively, tutors working with me will be notified by the Director of Disability Services of my disability.
- If I have questions, concerns, or problems related to my progress or to my approved accommodations, I will notify the Director of Disability Services.
- I must keep the Director of Disability Services informed of my progress on a regular basis.
- Prior to the beginning of each semester I must update my disability registration with the Office of Student Disability Services.
- If I am not satisfied with a decision about my accommodations or about academic issues, I have the right to appeal the decision.
- No one can discuss my disability or academic progress with my parents or other relatives/friends without my permission, If I grant that permission, I must: 1) designate who that person is; 2) state her/his relationship to me; and 3) indicate by my signature below that I am granting that permission. The designated person must appear in person; discussions will not be held over the phone.

I have read and understand the above.

Student signature: _____

I give permission for the following person(s) to discuss my disability in person with the Director of Student Disability Services:

Student signature: _____

Director of Disability Services: _____