

## **Accommodations/Disability Support**

Colleges are required to treat students with disabilities as equals to students without disabilities according to the law. This means if you have a health condition that affects your daily living, the College will work with you to ensure your disability related needs are met in the classroom and in student housing. You must notify the College immediately of the accommodations needed because of the disability. Along with your request for accommodations, please complete the attached documentation from the appropriate medical professional such as your doctor, psychologist or other qualified diagnostician. The documentation should provide enough information for the College to determine what is a reasonable accommodation or academic adjustment. Accommodations for on campus housing must be submitted by May 1 for fall enrollment and October 1 for spring enrollment, and is based on availability.

For example, you may provide your most recent IEP and/or Section 504 Plan as well as your most recent evaluations. However, if the plan is dated more than three (3) years old from the date you are submitting your request, the College will require a new evaluation. If you are eligible for services through your state's vocational rehabilitation program, you may qualify for an evaluation at no cost to you, see <a href="http://askjan.org/cgi-win/typequery.exe?902">http://askjan.org/cgi-win/typequery.exe?902</a> to locate your state vocational rehabilitation program.

Below are some examples of accommodations and academic adjustments that may be requested. This is not an exclusive list, please inform the College if you need an accommodation that is not listed.

Additional time for tests. This may be helpful if you have difficulty writing, learning disabilities, or other condition that interferes with testing performance.

Permission to record lectures or have a note taker. This may be helpful if you have a learning disability or physical impairment that makes typing, writing or hearing difficult.

**Permission to have a personal care assistant.** This may be helpful if you need assistance transferring from a wheelchair or need assistance with bathing, dressing or using the facilities.

Modified deadlines, alternative work assignments or excused absences while seeking treatment. This may be helpful if you miss school because of hospitalization or the worsening of your condition keeps you out of school.

Accessibility for the visually impaired or blind. This may be helpful if you require assistive technology in the classroom.

**Medical withdrawal or leave of absence.** Helpful if you are unable to complete the session or semester of enrollment. <a href="http://catalog.gbc.edu/content.php?catoid=8&navoid=353">http://catalog.gbc.edu/content.php?catoid=8&navoid=353</a>

## **Academic Adjustment Request**

with copies of my most recent IEF are more than three (3) years of prior to the first scheduled	and/or Section and and area of the contract of	n 504 plan and cords must be	d evaluations. If provided at lea	these documents ast five (5) weeks
	Ciass Theeting	g. Opecinically	y, my disabili	
(taking notes, writing, concentrating	, hearing, seein	g, etc.)		
I am requesting the following a access to my education. In the			-	
(note taker, untimed tests, interprete	er, alternative fo	rmats, etc.)		
In addition, I intend to live or am a need accommodations for my dis		•		idence Halls. I
(permission to have a service anima with bathing and dressing, a room lo	•		ndant present in	my room to assist
You may contact me to set up a academic adjustments at the@	following n	umber		or by email at
Sincerely,				
	_ (student sigr	nature)		_ (today's date)
	_ (printed nam	ie)		_ (GBC ID#)

Please return this form to Deb Harbaugh in Financial Aid/Advisement by scanning and emailing to <a href="mailto:harbaugh@gbc.edu">harbaugh@gbc.edu</a> or faxing to 302-998-8631. Thank you!