



ACCOMMODATIONS REQUEST FORM

Name (please print): _____ Student ID: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Class/Program: Freshman Sophomore Junior Senior Adult Degree Program Graduate

A student who requests academic adjustments or modifications related to a disability must provide information and current documentation to the Accessibility Coordinator concerning his/her specific disability or condition and the requested modifications specified by a physician or an appropriate professional.

NATURE OF DISABILITY

Please provide a brief description of the nature of your condition/disability. Indicate accommodations generally required to assist you in your educational experience. **Attach additional pages to provide documentation of your disability, more details concerning your disability or condition, and specific accommodations requested.** You may receive additional information concerning available services and processes necessary for classroom adjustments.

I am a returning student and am requesting the same adjustment as last year with no changes.

Physical Impairment: _____

Accommodations Requested: _____

Sensory Impairment: _____

Accommodations Requested: _____

Specific Learning Disability: _____

Accommodations Requested: _____

Psychiatric Impairment: _____

Accommodations Requested: _____

I acknowledge that the exchange of information between Accessibility Services and other Bushnell University staff and/or faculty may be necessary to facilitate my requests. I give my permission for such communication when necessary. **Neither the specific diagnoses of my disability nor the specific nature of other confidential concerns will be released.**

I give my permission for Accessibility Services staff to discuss my case with the following individuals and/or offices:

Parents (list their names): _____

Outside agencies (specify): _____

Student Signature

Date

Please return this form and appropriate documentation to: 828 E. 11th Avenue, Eugene, OR 97401;
email: accessibilityservices@bushnell.edu; or fax 541-684-7282