

# Student Accessibility Information Form

The purpose of this form is to gather information in order to engage in an interactive process to determine effective and appropriate supports and accommodations. Completion of this form is not a guarantee that accommodations will be granted.

If you have any challenges to completing this form, please contact the Student Accessibility Coordinator directly at 414-382-6722 or at StudentAccessibility@alverno.edu

Please share as much information as you are able.

#### **Personal Information**

Last Name:
First Name:

Phone #:
Email:

Status
Status

Choose the option that best describes you:
Image: Choose the option that best describes you:

Inquiry □
Accepted Applicant □

Accepted Applicant □
Alverno Student ID#:

What academic program are you currently in or seeking to enroll in?

Were you referred to this website by someone? If so, by whom?

Are you a client of the Department of Vocational Rehabilitation in any state?

# **Disability Information**

Do you have a diagnosed disability/disabilities? Yes.  $\Box$  No.  $\Box$  Not sure.  $\Box$ 

If so, please share the name of your condition(s)

When were you first diagnosed? Have you had any updated evaluations since your initial diagnosis?

Please provide as much description as you can about how your condition impacts you, specifically as it relates to your functioning in an academic environment.

### **Supports and Accommodations**

a. Are you requesting academic accommodations at Alverno?

Have you received academic accommodations or other supports in a previous academic setting such as high school or another college?

Please share what supports and accommodations you received.

- b. Are you requesting **facility-based accommodations** accessible classrooms, elevators, etc.?
- c. Are you requesting any **housing/dining accommodations**? Please describe.

Do you currently live on campus?

Have you received **residential housing accommodations** in the past? If so describe.

d. Are you requesting **accommodations as a student athlete** to participate in intercollegiate or intramural play?

Have you in the past or are you now requesting accommodations to participate in intercollegiate or intramural play?

e. If you plan to **work on campus and need accommodations**, please contact Alverno's Human Resources department

# **Documentation**

Appropriate documentation from a qualified professional is required, in most cases, in order to receive accommodations. Criteria for documentation are offered on the Access Services for Students with Disabilities web page. Submit documentation as soon as possible after completing this form.

If you have questions about documentation, please contact the Student Accessibility Coordinator.

### **Submission of Information Form**

Save this form and then attach it to an email to the Student Accessibility Coordinator, Derek Blemberg at StudentAccessibility@alverno.edu

By submitting this form, you authorize the Student Accessibility Coordinator to use the provided disability-related information to discuss your needs for accommodations with appropriate college personnel on an as needed basis.

Please allow up to **two weeks** for this form to be processed and for the Coordinator to contact you. Don't hesitate after that time period to make contact via phone or email to learn of the status of your application.