Fall 2019

Student Accessibility Services Student Schedule Request

This form needs to be updated and submitted to the Office of Student Accessibility Services prior to each semester of enrollment and 3-4 weeks in advance for arrangement of accommodations such as scheduled services, auxiliary aids or alternative materials. Please write in **only** the faculty/staff you would like informed of your accommodations. If the schedule, instructor, or involvement in non-academic services change during the semester please updated this form.

For changes to your previous accommodations you will need to meet with the Coordinator in advance. Remember, **you are responsible for meeting with your instructors** at the beginning of the semester. The Coordinator will email you when your plan has been sent to your instructors.

Name:

Student ID Number:

Term (Fall, Spring, Summer):

Year:

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| --- | --- | --- | --- |
| **Course Prefix** | **Course Number** | **Course Section** | **Instructor’s Name** |
| *ENG**(Example)* | *111 (Example)* | *LO1 (Example)* | *John Smith (Example)* |
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| **Staff/Advisor Notification** | **Group Contact** |
| --- | --- |
| *Basketball/Phi Theta Kappa/TRiO/Academic Advisors/ACC Staff (Example)* | *John Smith (Example)* |
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**Accommodation Notice Agreement**

Send accommodation notice sent to all listed above. I understand accommodations are only provided to those faculty and staff listed on this form and when/if staff need information to implement accommodations. I understand this form applies only for the term and faculty/staff as listed.

 Signature and Date:

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Coordinator Notes Rec: Sent: Date: 7/2019