

Review of Outside Documentation

Outside Documentation Review Request



Student: _____ Age: _____ Gender: M F
 DSP: _____ School: _____ Date: _____

Purpose of Review (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Learning Disability (LD) | <input type="checkbox"/> Autism Spectrum Disorder |
| <input type="checkbox"/> Attention Deficit/Hyperactivity Disorder (ADHD) | <input type="checkbox"/> Communication Disorder |
| <input type="checkbox"/> Acquired Brain Injury (ABI) | <input type="checkbox"/> Mild Intellectual Impairment |
| <input type="checkbox"/> Psychological Disorder | <input type="checkbox"/> Cognitive Disorder NOS |
| <input type="checkbox"/> Only review for System-level accommodations | <input type="checkbox"/> Other (explain): _____ |

Relevant Student Information

- Most recent transcript included, if available GPA: _____
- Incoming (mark one): Freshman Transfer Graduate Dual enrolled/MOWR
- Academic standing: Sophomore Junior Senior Graduate
- Accommodations student is currently receiving, if any: _____

Course Test Accommodations	Course Accommodations	System Accommodations (must receive RCLD approval)
Extended time and/or "stop-the-clock breaks"/quiet or private space <input type="checkbox"/> Significant reading <input type="checkbox"/> Significant writing <input type="checkbox"/> Significant math <input type="checkbox"/> WP w/spell check <input type="checkbox"/> Text reading software <input type="checkbox"/> Voice recognition software <input type="checkbox"/> Calculator <input type="checkbox"/> Use of formula sheet <input type="checkbox"/> Use of word bank <input type="checkbox"/> Permission to write answers on text booklet, instead of using scantron <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Note taker and or tape recorder for lectures <input type="checkbox"/> Text materials in alternate format <input type="checkbox"/> Extended time on in-class assignments <input type="checkbox"/> Extended deadlines for assignments <input type="checkbox"/> Foreign language substitution for program <input type="checkbox"/> Access to power point or class notes ahead of time <input type="checkbox"/> Written notice of additional assignments <input type="checkbox"/> Alternatives to group projects/presentations when feasible <input type="checkbox"/> Relaxed attendance policies with permission of instructor <input type="checkbox"/> Classroom breaks <input type="checkbox"/> Other: _____ _____	<input type="checkbox"/> Placement Reading <input type="checkbox"/> Placement English/Essay <input type="checkbox"/> Placement Math <input type="checkbox"/> Extended time and/or "stop-the-clock breaks"/quiet or private space <input type="checkbox"/> WP w/spell check <input type="checkbox"/> Voice recognition software <input type="checkbox"/> Text reading software <input type="checkbox"/> Calculator <input type="checkbox"/> Substitution for RHSC foreign language Up to two additional semesters in Learning Support <input type="checkbox"/> Reading <input type="checkbox"/> English <input type="checkbox"/> Math
Other Recommended Accommodations	<input type="checkbox"/> Priority registration <input type="checkbox"/> Reduced course load <input type="checkbox"/> Preferential seating	<input type="checkbox"/> Other: _____ _____ _____

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Additional information for review:

Previous use of accommodations:

Effectiveness of accommodations:

Other comments: