



Disability Services for Students (DSS) Accommodation Request Form

Qualified individuals with diagnosed and documented disabilities are eligible for reasonable accommodations under section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA), as amended in 2008 (ADAAA). Accommodations are determined on a case-by-case basis.

To be considered eligible for accommodations, you must initiate a request by submitting this completed form along with documentation that supports your request for accommodations. If accommodations are extended, they are valid for one academic year and must be renewed each consecutive year by completing a new request form. Further documentation is not required for subsequent requests unless otherwise specified by DSS.

RIN

Date Submitting Form

Student Information

Last Name:	_____	First Name:	_____
Local Address:	_____	Email :	_____
Local Phone:	_____	Home Phone:	_____
Cohort/ Class Dean:	_____	Major:	_____

Emergency Contact Information

Full Name

Contact Info

Relationship

- ☐ Please check this box if DSS has permission to discuss your disability related information with your emergency contact and sign below

Disability Resource Information

Are you currently receiving support from any state or government agency? (i.e. state vocational rehab agencies, Veterans Administration, etc.?)

- ☐ No
☐ Yes (please specify) _____

Agency Name/ Caseworker Contact Info

- ☐ Please check this box if you do NOT want to be added to the Disability Services for Students List Serv to receive information on available resources, career opportunities, and/or important updated regarding DSS. Participation in this List Serv is anonymous.



Accommodation Information

- ☐ Initial Request
- ☐ Updated Request (no changes)
- ☐ Updated Request (with changes)

Documented Disability (Please list all diagnoses related to requested accommodations)

Requested Accommodations*

- ☐ Extended time for in-class assignments
- ☐ Extended time for exams and quizzes
- ☐ Alternate testing environment
- ☐ Preferential seating
- ☐ Note-taking assistance
- ☐ Modified classroom materials
- ☐ Alternate Format Textbooks
- ☐ Housing Accommodations (please specify) _____
- ☐ Priority Registration
- ☐ Other Accommodation (s)

- ☐ Assistive Devices

*Students are required to make an appointment with DSS to review the documentation provided and participate in a discussion to determine appropriate and reasonable accommodations. Reasonable accommodations will be granted for qualified individuals with disabilities to the extent that these accommodations do NOT: (1) result in a fundamental alteration of the service/program/activity (2) result in an undue financial, administrative, academic burden (3) result in a direct threat to the health or safety of self or others, and/or (4) infringe upon the rights of others.



Confidentiality of Disability Related Student Information

The Office of Disability Services for Students (DSS) is committed to ensuring that all information and communication pertaining to a student's disability is maintained as confidential as required or permitted by law.

The following guidelines about the treatment of such information have been adopted by DSS and will be shared with students. These guidelines incorporate relevant state and federal regulations.

No one will have immediate access to DSS student files except the appropriate staff of DSS or Student Health Center, in which DSS is located. Any information regarding a disability is considered confidential and will only be shared with others within the Institute who has a legitimate educational interest.

This information is protected by the Family Education Rights and Privacy Act (FERPA) and the Health Insurance Portability and Accountability Act (HIPPA). Sensitive information in DSS student files will not be released except in accordance with federal and state laws.

A student's file may be released pursuant to a court order or subpoena.

If a student wishes to have information about his or her disability shared with others outside the Institute, the student must provide written authorization to DSS to release the information. Before giving such authorization, the student should understand the purpose of the release and to whom the information is being released.

A student has the right to view his or her own DSS file with reasonable notification.

I, _____, have been informed of the policy regarding confidentiality and the release of information from my DSS file. I understand that DSS may release information from my file to be used in a confidential manner with appropriate Institute faculty and staff who have a legitimate educational interest while I am a student at Rensselaer Polytechnic Institute.

Student Signature

Date

The Advising and Learning Assistance Center (ALAC) offers academic support to all students on campus. ALAC employs a learning specialist who specializes in working with students with disabilities. DSS highly recommends all students take advantage of this valuable, free resource and that students who are registered with DSS allow for information sharing regarding a student's disability and academic needs. Please sign below to consent to disclosure of disability related information from DSS to ALAC should you utilize this additional support service.

Name _____

Date _____