**student affairs**

Student Affairs exists to create a culture of vibrant student learning through involvement. Our teams of student development educators facilitate the growth and development of students as referenced in the mission statement below.

**mission statement**

Our mission is to develop students who are responsible, empowered and who graduate prepared to respond to the challenges of leadership and service. In order to foster this mission, Student Affairs will partner with other university divisions to provide progressive, innovative, “student-centered” programs and services while fostering the “students first” philosophy.

**student health services** updated/submitted per Ms. albritten

**Counseling Services**

The primary function of Counseling Services is to support students in their total development by providing services and programs to optimize their emotional, interpersonal, intellectual and academic well-being.

Professional staff provides confidential psychological counseling and consultation services to currently enrolled ASU students. The department offers brief individual and couples therapy. Additional services offered through Counseling include marital and family therapy, group sessions, crisis intervention, consultation, outreach, presentations, workshops, and referrals.

Counseling Services also sponsors The BACCHUS and GAMMA Peer Education Network, a student organization that provides peer education related to alcohol and drug prevention. Special programs are scheduled throughout the year but particularly during Homecoming Week, National Collegiate Alcohol Awareness Week and Safe Spring Break Week to promote healthy decision making regarding alcohol and drugs.

**Regents Center for Learning Disorders (RCLD)**

The Regents Center for Learning Disorders (RCLD) at Georgia Southern University is one of three centers in Georgia established by the Board of Regents to provide assessments, resources, and research related to students with learning disorders. The Center serves students from GSU and twelve additional institutions in the southern area of the state. Students with a history and/or those perceived as having learning disabilities, ADHD, or psychological disabilities may be referred by the enrolling institution’s disability service provider for a comprehensive assessment, feedback on appropriate academic accommodations, and recommendations for optimal educational achievement. Disability service providers may consult with the Center regarding disability documentation and assessments performed by other professionals.

**Disability Student Services**

Any student interested in having an evaluation must contact the Disability Services Coordinator for information concerning the availability of these services. The Disability Services Coordinator will also make available the criteria for identifying specific learning disabilities, ADHD, and/or accepting outside evaluations (assessments completed by an agency other than one of the three Centers).

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**Provisions for Learning Disabilities and Physically Impaired Students**

Albany State University’s policy regarding students with learning and physical disabilities complies with the University System of Georgia Board of Regents policies and all related Federal legislation. Students who have documented disabilities, who have met all of the admissions criteria and are otherwise qualified, should voluntarily register with the university Disability Services Coordinator. Albany State University provides accommodations which enable disabled students to pursue their educational goals.

**Definition of Disability**

An individual must demonstrate that his/her condition meets the definition of a disability under the Rehabilitation Act, 1973 and/or the Americans with Disabilities Act (ADA), 1990, and it’s Amendment (2009). The ADA defines a disability as a physical or mental impairment that substantially limits one or more major life activities.

Substantially limits, under ADA, refers to significant restrictions as to the condition, manner, or duration under which an individual can perform a particular major life activity as compared to most people.

Whether a condition is substantially limiting to support an accommodation request is a decision made by qualified professional(s) based upon multiple sources of information.

A clinical diagnosis is not synonymous with a disability. The specific symptoms that are present should be stated in the documentation. Evidence that these symptoms are associated with substantial impairment in a major life activity is required for provision of accommodations. A detailed description of current substantial limitation in the academic environment is essential to identify appropriate academic accommodations, auxiliary aids, and services. Specific requests for accommodations need to be linked to the student's current functional limitations, and the rationale for each recommendation clearly stated.

**General Documentation Guidelines**

All institutions are required to have written policies and procedures for review of documentation submitted by students with disabilities. Decision-making for the provision of institutional-level accommodation is provided by the Office of Disability Services (ODS) or a designated office at an individual college or university.

Secondary education eligibility reports, Individualized Educational Plans, Summary of Progress reports, or previous provision of special education services may not be sufficient documentation for college-level accommodations.

Documentation should provide a diagnostic statement identifying the disability, describe the diagnostic criteria and methodology used to diagnose the condition, and detail the progression of the condition if its impact on the student's functioning is expected to change over time.

Documentation should provide an adequate representation of the student's current functional abilities. In most situations, documentation should be within three years of the student's application for services. Professional judgment, however, must be used in accepting older documentation of conditions that are permanent or non-varying, or in requiring more recent documentation for conditions for which the functional impact may change over time.

Documentation must include the names, signatures, titles, and license numbers of the appropriate evaluators, as well as the dates of testing and contact information. Evaluators must be licensed professionals whose training and licensure status is consistent with expertise in the disability for which they provide documentation.

**Learning Disabilities**

Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical skills. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction, and may occur across the life span. Problems in self-regulatory behaviors, social perception, and social interaction may exist with learning disabilities but do not, by themselves, constitute a learning disability. Although learning disabilities may occur concomitantly with other disabilities (e.g., sensory impairment, mental retardation, serious emotional disturbance), or with extrinsic influences (such as cultural differences, insufficient or inappropriate instruction), they are not the result of those conditions or influences. (National Joint Committee on Learning Disabilities, Learning Disabilities: Issues on Definition, January, 1990.)

Specific documentation guidelines for Learning Disabilities include the following:

General documentation guidelines listed in Appendix D.

Clear and specific identification of a learning disability must be stated. For example, the terms "Learning styles" or "Learning differences" are not synonymous with a learning disability.

Documentation of a developmental and educational history consistent with a learning disability.

Since the manifestations of a learning disability may change over the period of childhood and adolescence, documentation must reflect either data collected within the past three years or after the age of 18.

Information gained from standardized assessment instruments is one essential piece of the methodology used to diagnose learning disabilities. Therefore, documentation of learning disabilities must include standardized measures of academic achievement and cognitive processing abilities that have age-appropriate normative data for high school/college students or older adult non-traditional students. All standardized measures must be represented by standard scores and percentile ranks based on published norms.

Documentation of a functional limitation(s) in one or more of the following areas of academic achievement:

* + Reading (decoding, fluency, and comprehension)
  + Mathematics (calculations, math fluency, and applied reasoning)
  + Written Language (spelling, fluency, and written expression)

Documentation of relative strength(s) in academic achievement in order to establish the presence of a significant discrepancy between academic domains. The presence of a significant discrepancy will typically require a difference of one standard deviation between scores. However, qualified professionals may use other widely accepted metrics for documenting a significant difference between two scores (e.g., standard error of measurement).

Documentation that alternative explanations for the academic limitation(s) have been considered and ruled out (e.g., low cognitive ability, lack of adequate instruction, emotional factors such as anxiety or depression).

Documentation of a pattern of cognitive processing weaknesses and strengths that is associated in a meaningful way with the identified area(s) of academic limitation.

Both processing weaknesses and processing strengths must be identified and must represent a significant discrepancy between cognitive domains. The presence of a significant discrepancy will typically require a difference of one standard deviation between scores. However, qualified professionals may document a significant difference between two scores using other widely accepted metrics (e.g., standard error of measurement).

Processing weaknesses and strengths must be evident on multiple measures and not based on a single discrepant score on an individual test or subtest. Cognitive Processing Skills (selection dependent upon case) include the following:

* + Attention
  + Executive Functions
  + Fluency/Automaticity
  + Memory/Learning
  + Oral Language
  + Phonological/Orthographic Processing
  + Visual-Motor
  + Visual-Perceptual/Visual-Spatial

Documentation that alternative explanations for the cognitive limitation(s) have been considered and ruled out (e.g., low cognitive ability, lack of adequate instruction, emotional factors such as anxiety or depression).

These guidelines are intended to guide the review of documentation and cannot substitute for the expertise and clinical judgment of a qualified professional. Failure to fully meet each of the above criteria does not automatically preclude a diagnosis of learning disabilities. In some circumstances, this diagnosis may be justified, based on an expert's integration of a student's history, test performance, and current functioning.

**Attention-Deficit/Hyperactivity Disorder (AD/HD)**

AD/HD is a persistent pattern of inattention and/or hyperactivity-impulsivity that is more frequently displayed and more severe than is typically observed in individuals at a comparable level of development. The manifestations of AD/HD result in functional impairment in at least two settings (e.g., academic, occupational, social). The diagnosis of AD/HD is based on the following specific criteria included in the current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM) of the American Psychiatric Association.

Specific documentation guidelines for AD/HD include the following:

General documentation guidelines listed in Appendix D.

Diagnosis and corresponding code from the most recent DSM must be included.

Assessment of the following diagnostic criteria is required and evaluation results must be included in the documentation:

Developmental history of either inattention and/or hyperactivity-impulsivity symptoms during childhood. The specific symptoms that were present in childhood should be stated in the documentation. Corroboration of childhood symptoms should be included, and may need to be gathered from a variety of possible data sources (e.g., parent/guardian report, school records, past evaluations). Evidence that these symptoms were associated with some functional impairment in home and/or school settings also must be included.

Current symptoms of either inattention and/or hyperactivity-impulsivity must be present. The specific symptoms that are present should be stated in the documentation. Self-reported current symptoms should be corroborated by an independent informant who has been able to observe the student's recent functioning with adequate regularity to provide this type of information. Evidence that these symptoms are associated with functional impairment in academic, occupational, and/or social settings also must be included.

The frequency/severity of both childhood and current AD/HD symptoms should be documented by comparison to individuals at a similar level of development. Documentation must include the results of standardized rating scales that provide comparison to age-based normative data.

**Pervasive Developmental Disorders**

Pervasive developmental disorders are characterized by severe and pervasive impairment in several areas of development including reciprocal social interaction skills, communication skills, or the presence of stereotyped behavior, interests, and activities. Several different disorders fall within this category including Asperger's Disorder and Autistic Disorder.

**Asperger's Disorder**

Asperger's Disorder is a pervasive developmental disorder characterized by qualitative impairment in social interactions and the presence of repetitive and stereotyped behaviors, interests, and activities.

Specific documentation guidelines for Asperger's Disorder include the following:

General documentation guidelines listed in Appendix D.

Diagnosis and corresponding code from the most recent DSM.

Assessment of the following diagnostic criteria is required and evaluation results must be included:

Developmental history that includes evidence of Asperger's Disorder symptoms in childhood and documents the absence of clinically- significant general delay in early cognitive or language development.

Documentation of current qualitative impairment in social interaction.

Documentation of current restricted, repetitive, and stereotyped patterns of behavior, interests, and activities.

Assessment of broad cognitive ability and language function using standardized assessment measures with age-appropriate norms.

**Autistic Disorder**

Autistic Disorder is a pervasive developmental disorder characterized by qualitative impairment in social interactions, qualitative impairment in communication affecting both verbal and nonverbal communication skills, and the presence of repetitive and stereotyped behaviors, interests, and activities.

Specific documentation guidelines for Autistic Disorder include the following:

General documentation guidelines listed in Appendix D.

Diagnosis and corresponding code from the most recent DSM.

Assessment of the following diagnostic criteria is required and evaluation results must be included in the documentation:

Developmental history that includes evidence of Autistic Disorder symptoms in childhood.

Documentation of current qualitative impairment in social interaction.

Documentation of current qualitative impairment in communication

Documentation of current restricted, repetitive, and stereotyped patterns of behavior, interests, and activities

Assessment of broad cognitive ability and language function using standardized assessment measures with age-appropriate norms

**Acquired Brain Injury (ABI)**

Brain injury can result from external trauma, such as a closed head or an object penetration injury, or internal trauma, such as a cerebral vascular accident or tumor. ABI can cause physical, cognitive, emotional, social, and vocational changes that can affect an individual for a short period of time or permanently. Depending on the location and extent of the injury, symptoms can vary widely. Understanding functional changes after an injury and resulting implications for education are more important than only knowing the cause or type of injury.

Specific documentation guidelines for ABI include the following:

General documentation guidelines listed in Appendix D.

Documentation of date of occurrence/diagnosis and the nature of the neurological illness

or traumatic event that resulted in brain injury.

Depending upon the functional domains impacted by the injury, assessments of cognitive and academic deficits and strengths, psychosocial-emotional functioning, and/or motor/sensory abilities relevant to academic functioning may be essential components of documentation of the impact of an acquired brain injury for an individual student.

Impairments following an acquired brain injury may change rapidly in the weeks and months after the injury, and a more stable picture of residual weaknesses may not be apparent for 1-2 years after an injury. More recent documentation may be necessary to adequately assess the student's current accommodation needs.

Cognitive and academic processing weaknesses and strengths must be evident on multiple measures and not based on a single discrepant score:

Academic Achievement:

Reading (decoding, fluency, and comprehension)

Mathematics (calculations, math fluency, applied reasoning)

Written Language (spelling, fluency, written expression)

Cognitive Processing Skills

* + - Attention
    - Executive Functions
    - Fluency/Automaticity
    - Memory/Learning
    - Oral Language
    - Phonological/Orthographic Processing
    - Visual-Motor
    - Visual-Perceptual/Visual-Spatial

**Psychological Disorders**

Some individuals experience significant disruptions in mood, thinking, and behavioral regulation that are secondary to a psychological disorder. Many different psychological disorders can interfere with cognitive, emotional, and social functioning and may negatively impact a student's ability to function in an academic environment. The symptoms and associated impairment may be either chronic or episodic. Test anxiety by itself is not considered a psychological disorder. Complete descriptions and diagnostic criteria for psychological disorders are available in the current version of the DSM.

Specific documentation guidelines for psychological disorders include the following:

* General documentation guidelines listed in Appendix D.
* DSM diagnosis and corresponding DSM code.
* Description of the history, current symptoms, and severity of the disorder.
* Description of the expected progression or stability of the disorder.
* Description of the current functional limitations impacting academic performance resulting from the disorder.

**Sensory Disorders**

**Deaf and Hard of Hearing**  
Individuals who are deaf or hard of hearing experience a reduction in sensitivity to sound. Amplification may not assist the individual in interpreting auditory stimuli. Individuals who are deaf or hard of hearing from birth may experience lags in the development of speech and most often have language-based deficiencies.

Specific documentation requirements for hearing disorders include the following:

* General documentation guidelines listed in Appendix D.
* Description of the history, current symptoms, and severity of the disorder.
* Description of the expected progression or stability of the disorder.
* Description of the current functional limitations impacting academic performance resulting from the disorder.

**Visual Disorders**

Visual impairments are disorders in the function of the eyes that cannot be adequately corrected by medical or surgical intervention, therapy, or conventional eyewear. Individuals with visual disorders may not have any usable vision or the vision may be extremely limited (light, color or shadow perception only).

Specific documentation requirements for visual disorders include the following:

* General documentation guidelines listed in Appendix D.
* Description of the history, current symptoms, and severity of the disorder.
* Description of the expected progression or stability of the disorder.
* Description of the current functional limitations impacting academic performance resulting from the disorder.

**Mobility Disorders**

Mobility impairments refer to conditions that limit a person's coordination or ability to move. Some mobility impairments are congenital while others are the result of illness or physical injury. The functional abilities and limitations resulting from the impairment will vary from individual to individual.

Specific documentation requirements for mobility disorders include the following:

* General documentation guidelines listed in Appendix D.
* Description of the history, current symptoms, and severity of the disorder.
* Description of the expected progression or stability of the disorder.
* Description of the current functional limitations impacting academic performance resulting from the disorder.

**Systemic Disorders**

Systemic disabilities are conditions affecting one or more of the body's systems, including the respiratory, immunological, neurological, circulatory, or digestive systems. Systemic disabilities are often unstable therefore, the need for and type of reasonable accommodations may change over time.

Specific documentation requirements for systemic disorders include the following:

* General documentation guidelines listed in Appendix D.
* Description of the history, current symptoms, and severity of the disorder.
* Description of the expected progression or stability of the disorder.
* Description of the current functional limitations impacting academic performance resulting from the disorder.

**Other Disabilities**

Disabilities as defined by the ADA that are not covered by the guidelines described above may be eligible for accommodations to USG policies.

**Disabled Student Services**

Albany State University complies with the Rehabilitation Act of 1973 (Section 504) and The Americans with Disabilities Act of 1990 (Title II). Students with special needs, accommodations and/or questions relating to either of 504/ADA should contact the Disability Services Coordinator.

**Religious Life**

Albany State University recognizes the need for spiritual guidance in the lives of its students and endeavors to give such guidance through non-denominational religious activities. One of the highlights of annual campus activities is the observance of Religious Emphasis Week. At this time ministers and spiritual consultants from various churches and organizations are invited to participate.

**University Police and Parking Regulations**

Albany State University Police provide 24 hours a day protection to faculty, staff, students, visitors. ASU Police employs State of Georgia certified police officers with full arresting powers to facilitate safety, maintain orderly conduct of University business and provide parking facilities in support of this function within the limits of available space. Additional information will be provided during orientation or you may contact ASU Police at (229) 430-4711. We are located on campus directly across from the ACAD/Administration Building.

**Student Government Association (sga)**

The purpose of SGS is to serve and represent the student body; to serve and work toward the betterment of the University; to provide sound, democratic self-government; encourage cooperation among students, faculty, administration, and community; and to promote school spirit and loyalty to Albany State University.

**Student Activities advisory board (saab)**

The purpose of SAAB is to enlighten the student body through the implementation of co-curricular and extracurricular activities on the campus of Albany State University. Considering that SAAB is a separate entity from SGA, this organization is able to provide direct service to students in the form of quality programming. The SAAB staff is hospitable at events and promotes school spirit and collaboration among students, faculty, staff and the local community.

**Student Life & Activities**

The purpose of the Office of Student Life & Activities is to enhance student learning and the quality of campus life, to assist in the retention of students, to foster personal development, to promote an environment in which cultural diversity is valued and respected, and to improve the overall educational experience of students. The staff is responsible for providing assistance and resources in all aspects of program planning to student organizations, as well as campus departments.

Our mission is to provide both personal and professional customer service that transcends the Albany State University community by promoting student recruitment, retention, and holistic learning through the establishment of a safe, secure and inclusive environment, where students are free to express themselves and engage in co-curricular activities that encourage student leadership, ongoing development and total wellness in order to matriculate, graduate and successfully progress in to a competitive workforce that will challenge them to utilize and maximize their full potential. This is accomplished through the promotion of student governance, cultural, intellectual, social, recreational, and leadership activities outside the classroom. The Office of Student Activities recognizes that its mission is accomplished through the close interaction of students, faculty, and staff working together to meet the extracurricular and co-curricular needs of the students attending Albany State University.

The Office of Student Life & Activities offers a number of programs and services to fulfill its mission. For example, the department is responsible for University Programming, Community Service Projects, Intramural Sports and Open Recreation, Greek Life, Judicial Affairs, Ombudsman functions, Student Leadership Development Programs, Student Government Association, Student Clubs and Organizations, Recreational Services, use of Sanford Hall Gymnasium, use of J.C. Reese Student Union Building, use of the new Student Center and use of ASU Grounds. The department also approves flyers, posters, handouts, and the like for distribution and posting on campus.

The Office of Student Life & Activities is also responsible for advising the following groups: Student Activities Advisory Board, Miss Albany State University & Royal Court, Mr. Royal Gentleman & Royal Gentlemen, ASU Pan-Hellenic Council, Paraprofessionals Promoting Peer-fection Organization and the Student Government Association.

Events such as ASU by Candlelight, President’s Council Student Leader Dinners, Coronation, Homecoming, Miss ASU Pageant, Mr. Royal Gentleman Competition and the Student Government Association Elections are just a few other activities the Office of Student Activities sponsors.

**The James C. Reese Student Union**

The J.C. Reese Student Union and the new Student Center are gathering places for campus, creating a sense of community among students, faculty, staff, alumni and friends of Albany State University.

They both serve as campus “Living Rooms” for all students and for student life and activities. They have as objectives the fulfillment of cultural, educational, developmental, and recreational desires of all students of Albany State University. The student union and new student center are also designed to provide a clean, comfortable, holistic and safe environment for both formal and informal events, as well as quality services, for the University and the ASU community.

Various programs and activities are planned and supervised by the Office of Student Life & Activities to broaden the experiences of each student.

The facilities and services of the Union/Student Center are for students to make full use. They include conference and meeting rooms, ball rooms, lounges, Recreational Centers, the ASU Bookstore, a Post Office, the RAM Card Office, Laundry Services, Chick-fil-A, Einstein Brothers Bagels, ATM (Bank of America), Higher One Card System, and information/customer service desk and vending machines. Offices include Student Government Association, Student Activities Advisory Board, Counseling and Disability Services, Student Life/Judicial Affairs, Recreation & Intramural Sports, Student Activities and the Vice President of Student Affairs. Normal hours of operation are form 8:00 a.m. – 5:00 p.m. on Monday – Friday. However, hours are subject to change due to student needs. There is also an on-campus Subway located in Hall 4 and Pizza Hut in Hall 6.

**Campus Organizations**

The University recognizes the role, which organized activities serve in enlarging the educational experiences of the members of the University community. Intellectual and personal growth takes place in student organizations, which have effective leaders and effective members. Students are encouraged to participate in programs provided by these organizations and the staff of the University serves to assist student organizations in programs. As a result, the University has adopted criteria for the approval of student organizations.

The Office of Student Activities shall review and act on all requests for such approval. Criteria for this approval and procedures to be followed in seeking approval are included in the Manual for Clubs and Organizations, published by the Office of Student Activities.

Organizations duly recognized under these policies and procedures enjoy certain privileges:

1. A meeting place assigned in available University facilities.
2. Appropriate and available facilities for social functions assigned to an organization in accordance with University policies.
3. The privilege of participation in specified activities and programs is accorded an organization… (i.e. Homecoming Activities in accordance with University policies).

Concomitantly, approved organizations, as agencies within the University community, are responsible for conforming to University regulations and procedures as contained in the Student Survival Guide and the Student Handbook. Suggestions for revision should be brought to the attention of the Office of Student Life & Activities. There are various registered clubs and organizations on campus (affiliated with our office), including several Honor Organizations, Service Greek-letter Fraternities and Sororities, Social Greek-letter Fraternities and Sororities, General Interest & Departmental Organizations, Academic Organizations, International Organizations, Leadership Organizations, and Religious Organizations. These organizations have applied for and met all the qualifications to actively operate on campus. Meaningful involvement in such out-of-class experiences is likely to provide opportunities for the development of self-governance, leadership, decision-making, team building and planning skills.

Membership in these organizations is open to students in good standing, who meet the common-interest objectives of the organization and their own internal criteria and standards. The majority of these organizations should contact the advisor. Guidelines are also outlined for students wishing to establish their own student club or organization.

**The Center for the African American Male (CAAM)**

The center for the African- American male (CAAM) at Albany State University is dedicated to developing African-American men to be leaders in the community, the state of Georgia and the nation. Within the framework of applied culturally sensitive research, the center fulfills its commitment to improving the image, as well as the quality of lives of African-American families by addressing the developmental needs, interests and talents of male collegiate students and youth.

Through special programs and mentorship training the Center strives to improve the “total man” academically, spiritually and socially. CAAM participants give back to the community by mentoring, tutoring and otherwise contributing to Albany State University, the city of Albany and the Southwest Georgia region. Continually nurtured and supported in positive ways, participants of The Center for the African American male will become successful leaders and contributors to a more just society.

**Career services** updated/submitted per albritten

**administrative support staff (page 252)**

Gwinetta L. Trice

Director, Student Life and Activities

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John Fields, Jr.

Interim Chief of Police

Albany State University Police

B.A, Albany State University

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Interim Director, Center for the African American Male (CAAM)