



LETTER OF ACCOMMODATION DISABILITY SUPPORT SERVICES

STUDENT: Sample Student

DATE: September 17, 2012

QTR: Fall 2011 (B122)

Dear Instructor: The above named student has a documented disability that has been recognized by Green River Community College. Discrimination against individuals with disabilities is prohibited by Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. Accommodations marked below are those for which your student is eligible. *Thank you for partnering with us to make our programs accessible to all students.*

ALTERNATIVE TESTING ARRANGEMENTS TO BE MADE BETWEEN INSTRUCTOR AND STUDENT

Extended time – time & a half

Extended time – double time

Special location for exams Testing Center

Alternate reduced-distraction location (ZWC-115)

Scribe* Reader* Other

*The **instructor** must notify the student four (4) instructional days prior to an exam so the student can make arrangements with DSS. The **student** must schedule testing time with the DSS office at least three (3) instructional days prior to the date of the exam for testing if a reduced-distraction location is required, or for a scribe or reader,. Otherwise, the student may use the general Testing Center location for other test accommodations.

OTHER ACCOMMODATIONS

USE OF TAPE RECORDER: Allow the use of a tape recorder as a substitute for or as a supplement to note taking.

PREFERENTIAL SEATING: Please discuss this with the student (be the placement for use of a tape recorder, specialized supportive chair arranged through DSS, or preference for a specific place within the classroom).

NOTE TAKING ASSISTANCE: Please make an announcement to the class asking for a volunteer to provide copies of his/her notes. Or, if you would like the DSS office to announce this note taking need in your class, please contact the DSS Accommodations Coordinator (Jean Carlson) at ext. 2318. ***Note:** The DSS office has No Carbon Required (NCR) paper for this purpose. Also, arrangements can be made to have photo copies made through the DSS Office.

ORAL COMMUNICATION: Please face the class at all times when speaking. Some students with audio perceptual problems need to see the person's face and lips as they speak.

OTHER:

STUDENT: *I understand that I am responsible for discussing my accommodations on this form with each of my instructors. I also understand that these accommodations are not retroactive; they do not take effect until I've discussed my need for accommodations with each instructor. It is in my best interest to discuss my accommodations with my instructor within one week of receiving this Letter of Accommodation. IN ADDITION: If I have testing accommodations, it is my responsibility to ensure that I allot myself enough time to complete my exam before the Testing Center closes.*

INSTRUCTOR: Letters of Accommodation are presented for the current quarter only. The student must discuss their accommodations needs with you as soon as possible. **Accommodations are not retroactive** and begin once the student has contacted you and discussed the implementation of their accommodations.

Student Signature

Date

Authorized DSS Signature

Date

QUARTERLY ACCOMMODATION INFORMATION

Appropriate accommodations that provide equal opportunity to participate in and receive the benefits of all programs and activities of the college are the right of each student with a disabling condition.

STUDENT RESPONSIBILITIES:

1. I will inform **DSS** of any changes in my condition of disability during the course of my educational enrollment here at GRCC. I will also inform **DSS** of any problems with my accommodations (i.e. equipment not working correctly, note taker not coming to class, accommodations not quite meeting student needs, etc.)
2. I understand that the use of Support Services (ASL, Visual, Note-Takers, CART, Typewell, etc.) is a major accommodation and requires **I provide DSS with a 24-hour notification** of an absence/cancellation. **If I fail to provide a 24-hour notification** for more than **3 consecutive school days**, these accommodation services **may be suspended** until I meet with the Director of DSS to discuss my attendance. Reinstatement of suspended accommodation services **may not be immediate** due to the time required to re-coordinate support staff schedules.
3. If I am late or unable to attend any of my classes due to my disability, I will notify my instructors either in person, by e-mail, or by phone 24 hours in advance of class. If I experience a medical emergency and am not able to contact my instructor prior to class, I will do so immediately thereafter. I will discuss missed assignments and tests, and if the instructor agrees, I will make arrangements for completion.
4. I will coordinate any special test taking arrangements with my instructor and the DSS coordinator at least **3 days prior** to the testing date. I will ensure my instructor has delivered tests to the testing center at least **2 days prior to the testing date**.
5. I understand that I need to be on time for all pre-arranged testing.
6. I understand that I am expected to meet the academic standards of the class that are expected of all students.
7. **Discuss** with the instructor(s) the accommodations for which I am eligible. I also understand that these **accommodations are not retroactive; they do not take effect until I have signed my LOA and discussed my need for accommodations**. It may be helpful to bring a copy of your LOA with you to have the discussion. DSS will e-mail your LOA to your instructors within one week of issuance.
8. I understand and agree to arrive on time for all classes, meetings with DSS staff, and my instructor(s), or make prior arrangements if I am late or absent.
9. I understand that it is in my best interest to utilize student resources available on campus (i.e., Help Center, Math Learning Center, Writing Center, DSS Lab, and ABE Lab) as appropriate to my program.
10. I will make formal requests for major accommodations (i.e. alternately formatted textbooks, sign language interpreter, scribe, reader) with the DSS Office *at least 20 instructional days in advance* of need.

DSS RESPONSIBILITIES:

1. Answer students' questions about DSS and accommodations; and provide orientation packet.
2. Once documentation is received from student and/or outside medical provider review documentation of a disability.
3. Meet with student and complete an Intake Interview to assess and identify reasonable accommodations.
4. Develop *LOA* with the student for distribution to each course instructor.
5. Upon request, help students and instructors with the coordination of accommodation.
6. Serve as an advocate for the college and students to ensure equal opportunity and equal access are available through reasonable accommodations in the classroom, with testing, and all college programs and activities.

FACULTY'S RESPONSIBILITIES

1. Review *Letter of Accommodation (LOA)* with student for application and reasonableness with course curriculum.
2. Provide the college authorized accommodations as outlined by Disability Support Services (DSS) in the *LOA*.
3. Discuss with each student having a *LOA*, methods for providing and coordinating accommodation(s) in specific situations/classes.
4. Consult DSS regarding questions about a student's accommodations.
5. Maintain confidentiality when speaking with students regarding *LOA* (i.e. do not speak with student in front of classmates; have conversations before and/or after class or during instructor's office hours.

If the faculty would like to have other suggestions regarding how to best instruct students with disabilities, please contact the DSS office (ext. 2631) for more information.