INSTRUCTOR NOTIFICATION FORM

The student from who you have received a course accommodation form, is registered with the Center On Disability as having a documented disability that requires the provision of reasonable accommodation. This determination is based not only the provided documentation but also upon the individual needs of the student to the specific requirements of the course. If you have any questions or concerns regarding these accommodations, please do not hesitate to discuss them further in private with the student or contact an appropriate staff member in the Center on Disability.

In addition we encourage you to take advantage of the helpful resources found in our “Faculty Corner” section of the Center on Disability website.

Please acknowledge that your have received and reviewed the accommodation form by signing and returning this form to the Center on Disability.

Instructor: ____________________________________   Course: __________________

(please print)

I have received the accommodation sheet listing the classroom and/or testing accommodations that the Center on Disability has recommended for:

_______________________________________   during the ______________

(student name) (semester)

Instructor’s Signature: __________________________ Date: __________________