



SPRING HILL COLLEGE

Center for Academic Support and Advising Services
(251) 380-3470 Fax: (251) 380-2147 accommodations@shc.edu

PHYSICAL & SYSTEMIC (MEDICAL) DISABILITIES

Physical and systemic (medical) disabilities include a wide variety of disabilities that have definitive physical causes and significantly impact the physical functioning of the student with the disability, resulting in a substantial limitation of one or more major life activities. Students with *temporary conditions* (i.e., a broken arm, a broken leg, etc.) may also be eligible for services through DS. Services are designed to facilitate access, to promote self-advocacy, and to afford students with physical and systemic disabilities the opportunity to achieve success at SHC.

DOCUMENTATION GUIDELINES

Students with physical or systemic disabilities and temporary conditions **should provide** documentation that meets the following criteria:

- The documentation must be **comprehensive and current** (within three (3) years prior the student's request for accommodation(s).)
- Professionals conducting assessments, rendering diagnoses of specific disabilities, and making recommendations for appropriate accommodation(s) must be qualified to do so (e.g., physician).
- The documentation **must** identify an unequivocal diagnosis of a specific disability.
- The documentation **must** discuss functional limitations caused by the disability in an academic environment or the environment in which the student is requesting accommodation(s).
- The documentation should **recommend accommodation(s)** compensate for the identified functional limitations.
- The documentation should list current medication, dosages, and existing (not possible) side effects.

Other Physical Disabilities

Students with a wide variety of other physical disabilities, including **temporary condition**, may be eligible to receive services and/or accommodation(s) as long as the physical disability has a definitive physical cause and significantly impacts one or more major life activities that affect the student's academic performance.

ACCOMMODATIONS ARE DECIDED ON A CASE-BY-CASE BASIS AND MAY INCLUDE, BUT ARE NOT LIMITED TO, THE FOLLOWING:

- Individualized Registration Counseling
- Extended time on in-class assignments and examinations
- Examinations in a quiet, distraction-reduced environment
- Consideration for absences
- Frequent breaks
- No scantron
- Note taker



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PHYSICAL AND SYSTEMIC (MEDICAL) DISABILITY FORM

****This form must contain ALL of the REQUESTED INFORMATION and be TYPED or PRINTED in order to apply for accommodations through Disability Services.****

Student's Name: _____

Date of Birth: _____

Address: _____

Phone Number: _____

STUDENT ID# : _____

This student is requesting an auxiliary aid or service, academic adjustment, and/or other accommodations from Disability Services. In order to consider this request, as well as to ensure the provision of reasonable and appropriate auxiliary aids and services, College Policy requires that a Qualified Professional provide current and comprehensive documentation. A qualified professional includes a medical doctor or other qualified healthcare professional *who is not a family member of the student*. **IN ORDER TO BE CONSIDERED CURRENT, THE QUALIFIED PROFESSIONAL'S STATEMENT MUST BE WITHIN 3 YEARS PRIOR TO THE DATE OF THE MOST RECENT REQUEST FROM DISABILITY SERVICES.**

The documentation provided must include information that diagnoses a physical or systemic (medical) disability, describes the functional limitations in an educational setting, indicates the severity and longevity of the physical or systemic (medical) disability for the purpose of determining academic adjustment(s) or other accommodation(s), and lists current medication along with any current side-effects which may impact academic performance.

If it is a visual disability the documentation must include the student's visual acuity (best corrected), a description of the effects of the visual problems, and a recommended font size for text when enlarged text is recommended as an accommodation.

To facilitate the gathering of such critical information, please respond to the following and return to SHC, Disability Services.

1. Diagnosis _____

2. Date of Diagnosis: _____ Date of Last Contact with Student: _____

3. Provide a summary of the student's educational, medical, and family history that relates to the physical or systemic (medical) disability (difficulties must be related to the diagnosed disability and are not the result of other conditions, cultural differences, or insufficient instruction):

4. Describe the student's functional limitations in an educational setting:

5. List current medication along with any current side-effects which may impact academic performance:

6. Please indicate the RECOMMENDATIONS you have regarding necessary and appropriate auxiliary aids or services, academic adjustments or other accommodations to equalize the student's educational opportunities at SHC as justified based of the functional limitations indicated above.

Please check all that apply: extended time (1.5x) distraction-reduced environment

alternative test format consideration for absences no scantron

books on tape enlarged text (font size) class notes

reader scribe

NOTE: Our policy regarding documentation prohibits the dissemination of documentation to you or anyone requesting it once it is received. Therefore, once this form is submitted, we will be unable to disseminate copies to anyone.

Qualified Professional's Signature _____

Printed Name & Title _____

Daytime Telephone Number _____

Address (City and State) _____

Date _____

Spring Hill College does not discriminate on the basis of race, color, national origin, gender, disability, or age in its programs and activities. The following persons have been designated to handle inquiries regarding non-discrimination policies:
EEO/Title IX Officer: Mr. Kevin Abel, 4000 Dauphin Street, (251) 380-3026, kabel@shc.edu; Deputy Coordinators – Dr. Christine Collins, 4000 Dauphin Street, (251) 380-2267, ccollins@shc.edu; Ms. Emily Marcouiller, 4000 Dauphin Street, (251) 380-4472, emarcouiller@shc.edu.
ADA Coordinator: Dr. Steven Almquist, 4000 Dauphin Street, (251) 380-4191, salmquist@shc.edu