



Request for Disability Services

Federal Law prohibits Disability Services from making pre-admission inquiries about disabilities. The Disability Services Office has been designated on campus to assist students with disabilities. In order to provide this assistance, it is necessary for students with disabilities to identify themselves in a timely manner. Please remember that any information you provide is strictly voluntary and will be kept confidential.

In order to facilitate your learning experience at Roanoke-Chowan, we ask you to complete the following information and return this form along with proper disability documentation to the Disability Services Coordinator.

Name: _____ Today's Date: _____

Student ID: _____ or SSN: _____ Date of Birth: _____

Address: _____
Street City State Zip

Primary Phone: _____ Other Phone: _____

Email Address: _____

Student Status: [] New Student [] Current Student Part Time [] Full Time []

*Sex: [] Male [] Female *Ethnicity: _____
*For statistical purposes only

Have you requested Disability Services in the past: [] Yes [] No If yes, when? _____

What is your intended major? _____

I am requesting accommodations because I am an individual with (check all that apply)

- [] ADD/ADHD [] Psychological Impairment
[] Hearing Impairment [] Physical/Medical Impairment
[] Visual Impairment [] Traumatic Brain Injury/Closed Head
[] Learning Disability [] Emotional Impairment
[] Other: _____

What major life activity is involved (check all that apply)

- [] Cognitive Ability [] Talking/Speech
[] Reading [] Walking
[] Writing [] Physical Activities
[] Math [] Other: _____

PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM

Using your own words, please describe your disability (ies) and how it affects your ability to function on a college campus, including in the classroom.

Please list any academic accommodations and services you are requesting.

Please read and sign below:

- ✓ It is the student's responsibility to make a disability known and to provide proper documentation from an appropriate professional describing a diagnosis, limitations, and recommended academic accommodations.
- ✓ It is the student's responsibility to request services in advance *each* semester.
- ✓ It is the student's responsibility to keep instructors and Disability Services informed of implementation and effectiveness of an academic accommodations.
- ✓ The student understands that academic accommodations aids are not automatically granted.
- ✓ Students registered with Disability Services must adhere to student behavior guidelines outlined in the Roanoke-Chowan Community College Student Handbook.

My signature below certifies that the information provided is accurate and acknowledges that I am fully aware of my responsibilities as it relates to my Request for Disability Services. My failure to follow these guidelines may result in a delay or interruption of services.

Student's Signature

Date

Parent/Guardian Signature for minors (under age of 18)

Date

Please return this completed form along with supportive documentation to:

Disability Services
Roanoke-Chowan Community College
109 Community College Road
Ahoskie, North Carolina 27910

Roanoke-Chowan Community College is committed to equality of educational opportunity and does not discriminate against applicants, students, or employers based on race, color, national origin, religion, sex, or disability