Request for Accommodation Letters

If you have never received accommodation letters through SSD at any previous time, please schedule an appointment with an advisor before completing this form. Also note that if you have not required accommodation letters for a year or more, you may be required to meet with an advisor before receiving your letters. If you require any assistance completing this form, please inquire at the front desk.

This section should be completed by all students.

Student Name: ___________________________ Student W#: ___________________________

Phone Number: ___________________________ Advisor: ___________________________

Select one of the following:  ○ Requesting letters with the same accommodations as before.
○ Requesting letters with new/updated accommodations. (Please complete Part B to schedule an appointment.)

Please indicate the semester for which you are requesting letters.  ○ SUMMER  ○ FALL  ○ SPRING

How many credit hours/courses are you registered for this semester?  Hours ___ Courses ___

How many hard-copy (paper) letters are you requesting for the semester?  # Hard-Copy ___

How many email letters are you requesting? (Note: Email letters are only available for online/distance learning courses.)  # Online/Email ___

If one or more of your letters need to be delivered to instructors by email, please provide your email address below. Please note that the address provided will be used to deliver disability related correspondence.

Student Email: ___________________________

If you have already received accommodation letters for the current semester and are requesting additional or updated letters, please check the appropriate item to the right.

○ Additional Letters  ○ Updated Letters  ○ Replacement Letters

Indicate the purpose of this appointment (check any that apply):

○ Request New Accommodations  ○ Follow-Up
○ Discuss Accommodation  ○ General Advisement
○ Update Documentation  ○ Complaint/Concern
○ Request a Referral  ○ Other

What is your preferred day/time for this appointment:

Day(s): ___________________________  ○ ASAP  ○ URGENT

Time: ___________________________

Use the space below to provide any additional information regarding this appointment:

______________________________________________________________________________________________

Continue to Part C on the Back
When did you last receive any accommodations through SSD or meet with one of our advisors? Respond as accurately as possible, even if you can only offer a “best guess”.

Example: Fall 2012

Select the single most appropriate response to each of the following items. If you feel the question does not apply to you, or you are otherwise unsure about how to respond, select Not Applicable. Your responses will in no way effect your eligibility for accommodations in the future.

1. Have you been receiving your accommodations in a timely and consistent manner?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

2. Have your accommodations contributed to your ability to be successful in your courses?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

3. Have your instructors been responsive to your accommodation request(s)?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

4. Were you able to meet with each instructor individually to discuss or clarify your accommodation needs?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

5. In general, are the procedures for receiving your accommodations clear, concise, and reasonable?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

6. Do you feel that you are treated respectfully and fairly by the SSD staff?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

7. In general, are you satisfied that the accommodations you received through SSD?
   - Always
   - Most of the Time
   - Part of the Time
   - Seldom
   - Never
   - Not Applicable

SSD values your opinion and is strongly invested in improving our programs and services. Please use the space below to offer any suggestions, critiques, or comments.

Please return this completed form to the SSD Reception Desk.
Alternatively, the form can be emailed to disabilityservices@weber.edu

THANK YOU!