

SCHOOL OF SOCIAL WORK

3.1.3 AUTHORIZATION DOCUMENT AND ACCOMMODATION REQUEST FORM

Date _____

Name: _____

Social Security Number: _____

Telephone: Day: _____ Evening: _____

E-mail address: _____

Faculty Advisor (if known) _____

Area of Specialization: _____

Concentration: _____

Note: Status of Medical Documentation to Verify Disability: Original documentation must be submitted to University's Student Services Office/Central ADA Office, Student Center, 222 N. Pine St., Room 238.

Modification/Service(s) requested for student by physician (please check appropriate box):

- | | | |
|---|---|---|
| <input type="checkbox"/> Campus van transportation (evenings only) | <input type="checkbox"/> Note-takers for classes | <input type="checkbox"/> Sign language interpreter |
| <input type="checkbox"/> Computer Lab Assistant (SSW) | <input type="checkbox"/> Proctoring exams | <input type="checkbox"/> Specially equipped computers |
| <input type="checkbox"/> Copying services | <input type="checkbox"/> Ramp accessibility | <input type="checkbox"/> TDD/TTY equipment |
| <input type="checkbox"/> Counseling through the University
Counseling Center | <input type="checkbox"/> Referral/testing to determine
learning disability | <input type="checkbox"/> Tape recorder/tapes |
| <input type="checkbox"/> Health Sciences/Human
Services Library | <input type="checkbox"/> Research assistance via HS/HSL | <input type="checkbox"/> Transcribers |
| | | <input type="checkbox"/> Tutoring services |

Other _____

I hereby give permission for the School of Social Work's Office of Student Affairs (OSA), in conjunction with the University's Student Services Office, to arrange for services/accommodations needed in the classroom, field sites, or overall environment. Note: It is the responsibility of the student to inform the field instructor or professor(s) of their disability at the beginning of every semester. In addition, ADA students are to meet with Director Cynthia Rice of the University's Central ADA Office at the beginning of every semester to discuss needed accommodations/services. The ADA Office is located in the Student Center, 222 N. Pine St., Room 238, and can be reached by calling 410-706-7117. Thank you.

NAME (Signature Required) _____

Date _____

Detach and return form to: Office of Student Affairs
University of Maryland School of Social Work
Louis L. Kaplan Hall
525 West Redwood Street
Baltimore, Maryland 21201
Telephone: 410-706-5100
Fax: 410-706-7897