Semester Renewal Accommodation Request

Thank you for your interest in the services offered by CalArts. It is important that you complete and return this form and proper documentation of your disability.

Students should complete this application and submit documentation as soon as you are aware of a disability-related need for services. The completion of this form and submission of necessary documentation allows us to work with you in planning effective academic accommodations during your time as a student.

Please note that your request for services cannot be fully processed until the student has completed both the application process and appropriate documentation is on file with CalArts Disability Services. Information provided to CalArts Disability Services is considered confidential and release of information is provided on a need to know basis only.

Semester Year: FALL ______  SPRING______ SUMMER_______  Year: BFA______ or MFA______

<table>
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<th>Student Name:</th>
<th>Student ID:</th>
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What (if any) accommodations have you used in your past educational experiences?

- Extended time on tests/assignments
- Spell checker
- Record lectures
- Sign Language Interpreter
- Kurzweil 3000
- Priority registration & registration assistance
- Tutoring services

- Distraction reduced setting
- Peer Note taker
- Preferential seating
- Text on CD/E-text/Audio text
- Enlarged print/digital format
- Adaptive furniture
- Other accommodations:

What types of accommodations would help you be academically successful for your disability?

- Extended time on tests/assignments
- Spell checker
- Record lectures
- Sign Language Interpreter
- Kurzweil 3000
- Priority registration & registration assistance
- Tutoring services

- Distraction reduced setting
- Peer Note taker
- Preferential seating
- Text on CD/E-text/Audio text
- Enlarged print/digital format
- Adaptive furniture
- Other accommodations:

What courses are you requesting accommodation(s) in?

Please list course name and Instructor:
Do you have any feedback or concerns from your accommodations last semester?

Depending on the nature of the disability new documentation might be required in moving forward.

_In signing below, I understand that my accommodation requests cannot be processed until I have completed the application process and turned in documentation._

Student Signature:_____________________________ Date:________________________