<u>To the student</u>: The Student Disability Services Center is designed to help students with special needs. If you are requesting accommodations, please submit the following documents and return them (together) to the listed location:

(1) Completed voluntary disclosure of disability form, (2) Completed authorization for release of information, (3) Documentation of disability—current statement from medical doctor or evaluation from psychiatrist/psychologist, (4) Copy of detailed course schedule (schedule with names of instructors) for current semester—print from BANNER

\*Please note: Each semester you need accommodations, you must provide a copy of your detailed course schedule.

Counseling and Student Disability Services
Albany State University
New Student Center (green zone)
504 College Drive
Albany, GA 31705

(229) 903-3610 Main number

(229) 430-3826 Fax



## Albany State University Voluntary Disclosure of Disability Form

**CONFIDENTIALITY STATEMENT:** The information on this form is confidential and will be released only to those individuals responsible for providing assistance to students with disabling conditions.

were you referred to this office because of an academic problem? Yes No		
e of application Semester		On campus Off campus
ent name RAM ID		_ Classification
Local address	City	State ZIP
Cell phone Home phone		
Email Insurance waiver (Medicaid, MR, MH, etc.)? Yes No	Veteran: Yes No SSI/SSA?	Yes No
Have you received previous accommodations? Yes No	Where and when?	
Type of disability: Mark all that apply.		
Attention Deficit Disorder (ADD)Attention Deficit Hyperactivity Disorder (ADHD) Brain injury (TBI)Dyslexia Hearing impairedMobility impairedOther learning disorder (LD)Psychological disorderVisually impaired Other (explain)		
Certification		
By signing below, you acknowledge that all information submitted is correct.		
Student signature		
For office use only		
Reviewed by		