

Disability Services

Request to Renew Accommodations

One of the Seattle Colleges

Attach your class schedule with this request.

Please ask a DS staff member if you need assistance filling out this form Please print the completed form and submit to the Disability Services Office located at CC2346A.

Name:				
Email Address:	Today's Date:			
Cell Phone:				
Quarter (Please check box & enter year): \Box So	ummer □ Fall □ Winter □ Spring			
Alright to leave a detailed voice messag	ge with department name and reason for our call? Yes No			
Best way to contact you: Cell Pho	one Email			
Please check all that approved accomm	nodations that you wish to access:			
☐ Exam:	DS will send Letters of Accommodation to your instructors notifying them of this request. Please follow up with your instructor to discuss Testing Center arrangements.			
☐ Notetaking:	 □ Non-confidential (Daily – Connected with volunteer notetake □ Confidential (Weekly – Received from DS Office) 			
☐ Furniture (Chair/Table):				
☐ Alternative Format:	Fill out purchased book information on back and include your original purchase receipt.			
☐ Interpreting:	(Please fill out our Interpreting Services Request Form)			
(387.75 – Seattle Colleges District Procedures and guidelines for the provision of Effective Communication services. 387.75.01 – Service provider for Seattle Colleges.)	Must be requested at least 4 weeks in advance. Requests for ASL services with less than 4 weeks' notice for ongoing classes may in delayed services. Fulfillment of requests is contingent on result service provider availability.			

!ATTENTION!

- Please submit this form at least 3 weeks before the beginning of the quarter. Requests received later than three weeks before the quarter could result in a delay in your accommodations. Especially if you receive:
 - o ASL, notetaking, ergonomic chairs, adjustable tables, or alternative textbook formats
- Please notify us immediately if you make changes to your class schedule or get added from a waitlist.
- All LOAs will include the same accommodations you've had previously.
- If you would like to adjust your accommodations, please call us at (206).934.3697 or email ds@seattlecolleges.edu to request an appointment.

 Turn over

Additional Information

This information is required only if you are requesting furniture or alternative format.

Course Abbreviation and Number	Course Section			Furniture	
		Room #		(List all furniture needed)	
				☐ Table ☐ Chair	
				☐ Other:	
				☐ Table ☐ Chair	
				☐ Other:	
				☐ Table ☐ Chair	
				☐ Other:	
				□ Table □ Chair	
				☐ Other:	
	Alte	rnative Textbo	ook Re	equest Form	
Book # 1 Title:				13-Digit ISBN#:	
				Author:	
Book # 2 Title:				13-Digit ISBN#:	
Publisher:		Edition:	Year: _	Author:	
Book #3 Title:			 	13-Digit ISBN#:	
Publisher:		Edition:	Year: _	Author:	
Book #4 Title:				13-Digit ISBN#:	
Publisher:		Edition:	Year: _	Author:	
Book #5 Title:				13-Digit ISBN#:	
Publisher:		Edition:	Year: _	Author:	