STUDENT RESPONSIBILITIES STATEMENT

Student Name: _____________________________________________________________

Student ID #: __________________

Type of Disability: _________________________________________________________

In accordance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disability Act (ADA), qualified individuals with disabilities are guaranteed certain protections and rights of equal access to educational programs and services. Academic accommodations are made in relation to a documented disability. Indiana Tech will collaborate with appropriate external agencies as needed in order to provide accommodations.

Students Requesting Accommodations are Responsible for:

1. Identifying self to the Services for Students with Disabilities (SSD) Coordinator
2. Providing documentation from a professional who is qualified to assess his/her disability.
3. Paying for the cost of professional evaluations if needed.
4. Completing appropriate paperwork.
   a. Student Responsibilities Statement
   b. Informed Consent and Release of Information
   c. Request for Academic Accommodations
5. Communicating how the disability impacts and functionally limits major life activities
6. Identifying effective accommodations.
7. Speaking with the SSD Coordinator to develop an Access Plan.
8. Contacting the SSD Coordinator at least once per semester to review the plan’s effectiveness.

Statement of understanding

I acknowledge the above guidelines. I understand that my failure to follow these guidelines may hinder the delivery time of my academic accommodations.

Student Signature: ___________________________ Date: ____________