

# SERVICE REQUEST FORM

## FALL 2017

<b>OFFICE USE ONLY</b>		
Added to SRF List		<input type="checkbox"/>
1	2	3

Please complete and return to The University Diversity and Inclusion Office (accommodation requests may take up to eight weeks to process). The detailed accommodation packet will be emailed to you as an attachment via your Washburn University email account only.

First		Middle		Last	
Current Mailing Address			City		State
Zip Code					
Telephone Number	Date of Birth	Nature of Disability			
SSN	WIN W	Official Washburn Email  @washburn.edu			
I plan to live on campus		I have an off-campus clinical/practicum/internship for the upcoming semester (4-8 weeks advance notice is needed to provide accommodations)			
Indicate your current degree plan:		Certificate	Undergraduate	Graduate	
Major:		Minor:			
WU Advisor:		VR Counselor:			

Type of Accommodations Requested (check all that apply):

Permission to Tape Record Lectures In-Class Notetaker Sign Language Interpreter Real-Time Captioning Large Print Table and Chair in Classroom Other (please specify):	Test Accommodations: Extended Test Time Distraction-Reduced Environment Test Reader Test Scribe Other: _____
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**PLEASE CHECK ONLY ONE:**

I request the above accommodations for all courses enrolled in during the fall 2017 semester.

I request the above accommodations for the following courses enrolled in during the fall 2017 semester.  
 (please specify):

I understand it is my responsibility to make an appointment with each of my instructors and to discuss my accommodations requests. If I am having difficulty with accommodations or I am changing my schedule, it is my responsibility to notify staff with The University Diversity and Inclusion Office as soon as possible.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>For office use only:</b>		Date emailed Student: _____	Date emailed Prof(s): _____
<input type="checkbox"/> R <input type="checkbox"/> A <input type="checkbox"/> N <input type="checkbox"/> AT <input type="checkbox"/> F <input type="checkbox"/> B <input type="checkbox"/> H <input type="checkbox"/> L <input type="checkbox"/> E		Comments: _____	
_____	_____		
Staff initials	Date		