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# Students with Disabilities Manual

Prepared by the Office of Disability Services

College of Central Florida

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—an equal opportunity college—

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## **Purpose Statement**

The purpose of the Americans with Disabilities Act, established in 1990, was to create the country's first civil rights legislation designed to meet the needs of and ensure equal rights to people with disabilities.

The purpose of this manual is to educate and aid staff, faculty, and students in the areas of accommodations and disabilities as they apply to an educational setting. The College of Central Florida provides, by law, accommodations to eligible and disabled students. These accommodations are for the classroom, testing, and other college related activities. For additional information, or to set up training opportunities, contact the Director of Disability Services at 352-873-5843.

## **Individual Education Plan**

An Individualized Education Plan (IEP) is developed by a group of parents, educators, advisors, and other specialists in order to determine what educational approach a child needs and how a child's education can be individualized based on his/her disability. IEP are given for learning disorder diagnoses and sensory disabilities. Oftentimes, the initial evaluation for an IEP occurs in the elementary school age years. In the post-secondary education setting, IEP's do not usually satisfy as adequate documentation to accompany a student's current disability. They do not carry over from high school into post-secondary education. They may, however, assist colleges as a reference tool, but are often an insufficient form of documentation on their own. Assessment information and other tools used to develop an IEP may be helpful to document the disability as well. If additional documentation is needed, a school official will inform you. A new evaluation funded by the student may be needed to provide new documentation.

References:

[https://www.bethelks.edu/userfiles/1/files/IDEA\\_ADA\\_IEPS\\_and\\_Section\\_504\\_Plans.pdf](https://www.bethelks.edu/userfiles/1/files/IDEA_ADA_IEPS_and_Section_504_Plans.pdf)

<https://www2.ed.gov/about/offices/list/ocr/transitionguide.html>

<https://www2.ed.gov/about/offices/list/ocr/transition.html>

## **Section 504**

Section 504 of the Rehabilitation Act offers protection in an educational setting for all persons who have a disability in the following cases:

1. Those who have a mental illness or physical limitation which limits one or more major life activities.
2. Have a record of such an impairment
3. Are regarded as having such an impairment.

To be protected under Section 504, a person's disability must substantially limit one or more major life activities. This includes actions such as walking, seeing, hearing, speaking, working, learning, breathing, or performing manual tasks. Regarding education, the question that comes into consideration is whether the disability prevents the person's capability to learn. In order to determine this, institutions must take into account more than a student's grades. Section 504 pertains to organizations that receive Federal funding, and is closely associated with the ADA. Under Section 504, students have a right to a Free, Appropriate Public Education (FAPE). A plan may be created with the student and a Disabilities Services Coordinator on campus. The student is responsible for disclosing whether s/he has a disability and in addition must voice that s/he needs accommodation. The institution has the right to request appropriate documentation regarding the disability, and is required to provide reasonable accommodations for the student's disability. Institutions receive no additional financial funds to provide support for the disability.

<http://www.pepnet.org/sites/default/files/22Americans%20with%20Disabilities%20Act%20-%20Responsibilities%20for%20Postsecondary%20institutions%20serving%20deaf%20and%20Hard%20of%20hearing%20students.pdf> )

### **What is an accommodation or academic adjustment?**

“Any change to a classroom environment or task that permits a qualified individual with a disability to participate in the classroom process, to perform the essential tasks of the class, or to enjoy benefits and privileges of classroom participation equal to those enjoyed by adult learners without disabilities. An accommodation is a legally mandated change that creates an equitable opportunity for task completion or environmental access. Further, an accommodation is an individually determined adjustment to a functional need. Special accommodations can range from low-tech rubber pencil grips to high-tech voice recognition software for computers” (University of Kansas, Institute for Adult Studies, 1998, p.54; Wolanin & Steele, 2004).

### **Classroom accommodations/academic adjustments questions and answers**

#### **May the College of Central Florida deny my admission because I have a disability?**

No. If you meet the essential requirements for admission, The College of Central Florida may not deny your admission simply because you have a disability.

#### **Do I have to inform the College of Central Florida that I have a disability?**

No. But if you want the school to provide an academic adjustment, you must identify yourself as having a disability. Likewise, you should let the school know about your disability if you want to ensure that you are assigned to accessible facilities. In any event, your disclosure of a disability is always voluntary. *The Disability Services department is located in building 5, the Bryant Student Union, upstairs on the second floor in room 205.*

#### **If I want an academic adjustment, what must I do?**

You must inform the school that you have a disability and need an academic adjustment. Unlike

your school district, your postsecondary school is not required to identify you as having a disability or to assess your needs.

College students are considered adults and their colleges are not required to provide any accommodations to a student who does not disclose that he or she has a disability. “NO accommodations will be provided unless the student identifies themselves to be a student with a disability, and provides documentation of their disability.” (The George Washington University, HEATH Resource Center, National Clearinghouse on Postsecondary Education for Individual with Disabilities, *Frequently Asked Questions*, p. 2; <https://www.heath.gwu.edu>).

The College of Central Florida requires you to follow reasonable procedures to request an academic adjustment. You are responsible for knowing and following those procedures. In our publications providing general information, CF includes information on the procedures and contacts for requesting an academic adjustment. Such publications include recruitment materials, catalogs, and student handbooks, and are even available on the school website. The College of Central Florida also has staff whose purpose is to assist students with disabilities. If you are unable to locate the procedures, ask a school official; such as an admissions officer or counselor, or call the ***Director of Disability Services at 352.873.5843***.

#### **Is anyone with a disability protected by these laws?**

To be protected by Section 504, you must be a "qualified individual with a disability." (29 U.S.C. § 794). Titles II and III of the ADA protect similarly defined individuals. With regard to educational programs, the term "qualified" means that you are capable of fulfilling the essential functions and requirements of the program, with or without the provision of "reasonable modifications." You can meet the definition of having a "disability," and thus be protected under the ADA and Section 504, under the following circumstances:

- You have a physical and/or mental impairment that substantially limits one or more major life activities, including, *but not limited to*, caring for yourself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing and working. Major life activities may also include school-related tasks such as learning, reading, concentrating, thinking, and communicating. Major life activities also include the operation of “major bodily functions,” including, *but not limited to*, functions of the immune system; normal cell growth; digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine and reproductive functions; or
- You have an impairment that is in remission or substantially limits you occasionally (rather than constantly), but if it were active, it would substantially limit you as defined above; or
- You have a *record* or *history* of having a physical and/or mental impairment that substantially limits one or more major life activities, as described above; or



- You are *regarded as*, or have been *misclassified as*, having a physical and/or mental impairment, *and* you have been subjected to a discriminatory act that is illegal under the ADA and/or Section 504. In other words, someone in authority has perceived you as being a person with an impairment, and has unlawfully discriminated against you because of that perception, even though in fact you have no disability, or the disability you have does *not* substantially limit a major life activity. Note that the emphasis of the ADA is on whether you were unlawfully discriminated against. It does not matter whether the person or institution regarded your impairment as being one that substantially limits one or more major life activities. Even if they discriminated against you on the basis of an impairment that they perceived was *not* one that substantially limits one or more major life activities, the discrimination is still unlawful under the ADA.

#### **When should I request an academic adjustment?**

Although you may request an academic adjustment from CF at any time, you should request it as early as possible. Some academic adjustments may take more time to provide than others. You should follow your school's procedures to ensure that the school has enough time to review your request and provide an appropriate academic adjustment.

#### **Do I have to prove that I have a disability to obtain an academic adjustment?**

Generally, yes. Here, at the College of Central Florida, we require you to provide documentation showing that you have a current disability and need an academic adjustment.

Each college or university has its own requirements for documentation necessary to prove the existence of a disability and the need for an accommodation. However, a college or university may not make these requirements so burdensome that they prevent individuals with disabilities from getting reasonable accommodations. You can find out if your school has any documentation of disability requirements by contacting the school's Disability Services Department, the ADA, the dean of Student Services, or your academic advisor.

Colleges and universities are only required to accommodate a student's disability or disabilities if the relevant school personnel are aware that the student has a disability or disabilities. If you seek a reasonable accommodation, and the school requests proof of your disability, you must provide that proof. The most effective way to show that you are entitled to reasonable accommodations is to get a letter from a medical professional who is familiar with you and your disability.

Documentation of your disability must be *current*, generally within the past three years if testing as an adult (Ch. 2016-2, Senate Bill No. 672; <http://www.pacer.org/publications/adaqa/504.asp>; Section 504, Rehabilitation Act of 1973, 2001). It must reflect your abilities and limitations at the time you request the accommodation. Therefore, seek documentation from the medical professional(s) who has most recently treated you for your disability.

You do not necessarily need *recent* documentation to establish proof of disabilities that do not substantially change over time. For example, some learning disabilities, such as dyslexia, do not show much change after an individual reaches age 18. Some physical disabilities may also show limited change over time. However, all documentation still needs to be *current* so that it reflects your *current* abilities and limitations. It is wise to supplement documentation that is more than **three years** old with a letter from your medical professional stating that the documentation accurately reflects your *current* abilities and limitations.

If you have a disability that may change substantially over time, or changes when you are in different environments, your school may require that you provide *recent* documentation to establish proof of your disability. This means that the school may require that you obtain updated testing and documentation every three years. An example of a disability that may change over time is attention-deficit/hyperactivity disorder (ADHD). An example of a disability that may become more or less severe with a change of environment is multiple sclerosis.

Your school may require that the person diagnosing your disability have certain credentials, such as a Ph.D. However, your school may insist on this requirement *only* when it is not a burden to the individual getting tested to have the test conducted by a person with a particular credential, or when a person with a particular credential must perform the test in order to ensure accuracy.

**What if my impairment lasts less than six months?**

Your impairment will not meet the ADA or Section 504's definition of a disability if your impairment is expected to, or in fact does, affect you for six months or less.

**Does the College of Central Florida have to provide students with disabilities reasonable modifications or accommodations for their disabilities?**

Yes. To ensure that their programs and activities are fully accessible to students with disabilities, colleges and universities are required to provide reasonable modifications, which are also sometimes known as reasonable accommodations. Specifically, colleges and universities are required to make reasonable modifications in their practices, policies and procedures, and to provide auxiliary aids and services for persons with disabilities, *unless* to do so would fundamentally alter the nature of the goods, services, facilities, privileges, advantages and accommodations [42 U.S.C. § 12182(b)(2)(A)(ADA requirements)].

**Will the College of Central Florida ever refuse to provide me with an accommodation that I need?**

Yes, but only under limited circumstances. The ADA and Section 504 only require schools to provide accommodations that are reasonable. Your school should not refuse to provide you with an accommodation, unless it can show that:

- Providing the accommodation would create an undue financial or administrative burden for the school;
- Providing the accommodation would fundamentally alter the school's academic program;

- The requested accommodation is of a personal nature (for example, assistance with eating or help with toileting).

In response to your request for a specific accommodation, your school may suggest an alternative accommodation or way to provide equal access. You do not have to accept the school's suggested accommodation, but you should keep in mind that you are not entitled to "the best" accommodation – just an accommodation that is effective and reasonable.

**The College of Central Florida denied the accommodation I requested. The reason I was given for the denial was that the accommodation would create a substantial modification of the school's academic standards. Is this a legitimate reason for the denial of a reasonable accommodation?**

It depends. Courts generally defer to a school's decision with regard to academic standards. The reason for this deference is that schools are generally better equipped than courts to determine whether a student meets that school's reasonable standards for academic achievement.

However, courts carefully review the school's reasoning to ensure that the school is not hiding discriminatory intent behind academic standards. In order to demonstrate that its motives are not discriminatory, a school has an obligation to provide serious consideration to a student's request for an accommodation.

After a student has informed the school that she or he has a disability and needs a reasonable accommodation, the school has a duty to:

- Make itself aware of the nature of the student's disability;
- Explore alternatives of accommodating the student; and
- Exercise professional judgment in deciding whether appropriate accommodations would give the student the opportunity to complete the academic program without fundamentally or substantially modifying the school's academic standards.

The school must perform these duties in good faith. It is not enough for the school to merely speculate that a suggested accommodation is not possible, or that it would not be an effective accommodation. When deciding not to provide an accommodation, the school must prove that it thoroughly considered whether the requested accommodation would substantially or fundamentally alter the school's academic standards. If the school can demonstrate that it has given appropriate consideration to the request, a court will likely find that the denial of the request was legal. If the school cannot demonstrate this, a court will be far less likely to defer to the school's judgment in deciding not to provide the accommodation.

**As a student with a disability transitioning from high school to college, what differences will I see, if any, regarding my rights and how they will be addressed?**

Yes. Section 504 and Title II protect elementary, secondary, and postsecondary students from

discrimination. Nevertheless, several of the requirements that apply through high school are different from the requirements that apply beyond high school. For instance, Section 504 requires a school district to provide a free appropriate public education (FAPE) to each child with a disability in the district's jurisdiction. Whatever the disability, a school district must identify an individual's educational needs and provide any regular or special education and related aids and services necessary to meet those needs as well as it is meeting the needs of students without disabilities.

Unlike your high school, however, your postsecondary school is not required to provide FAPE. Rather, your postsecondary school is required to provide appropriate academic adjustments as necessary to ensure that it does not discriminate on the basis of disability. In addition, if your postsecondary school provides housing to nondisabled students, it must provide comparable, convenient, and accessible housing to students with disabilities at the same cost.

Other important differences that you need to know, even before you arrive at your postsecondary school, are addressed in the remaining questions.

#### **How do I obtain a course substitution?**

The school is *not required* to provide you with a course substitution nor allow you to skip that requirement, if it would result in a substantial change to an essential element of the school's curriculum. Schools are allowed to set their academic standards, and are not required to lower their standards as a reasonable accommodation.

However, the school must undertake a diligent assessment of the available academic options before denying a request for a course substitution. If it determines that offering you a course substitution would lower academic standards or fundamentally alter an essential part of the school's academic program, then the school may deny your request. Even so, the school must provide you with any necessary reasonable accommodation(s) in order for you to complete the required course. *Ask the Director of Disability Services for the form and procedures regarding a course substitution.*

#### **What are some examples of academic accommodations/adjustments for the classroom?**

Colleges and universities are required by Section 504 and Title II to provide students with disabilities with appropriate academic adjustments and auxiliary aids and services that are necessary to afford an individual with a disability an equal opportunity to participate in the school's program. Some examples of academic adjustments are: extra time to take a test, alternative testing formats, large print, adaptive seating, beverages allowed in class, course substitutions, closed captioning, and priority registration. Examples of auxiliary aids include, but are not limited to note-takers, American Sign Language interpreters, audio recording of lectures, zoom digital magnifier, and specialized computer equipment.

Colleges and universities are not required to supply students with attendants, individually prescribed devices such as hearing aids and wheelchairs, readers for personal use or study, or other devices or services of a personal nature.

### **Testing Accommodations**

Standardized examinations and other high-stakes tests are gateways to educational opportunities. Whether seeking admission to a college, or attempting to obtain a professional license or certification for a trade, it is difficult to achieve such goals without sitting for some kind of standardized exam or high-stakes test. While many testing entities have made efforts to ensure equal opportunity for individuals with disabilities, the Department of Justice continues to receive questions and complaints relating to excessive and burdensome documentation demands, failures to provide needed testing accommodations, and failures to respond to requests for testing accommodations in a timely manner.

The Americans with Disabilities Act (ADA) ensures that individuals with disabilities have the opportunity to fairly compete for and pursue such opportunities by requiring testing entities to offer exams in a manner accessible to persons with disabilities. When needed testing accommodations are provided, test-takers can demonstrate their true aptitude.

The Department of Justice published revised final regulations implementing the ADA for title II (State and local government services) and title III (public accommodations and commercial facilities) on September 15, 2010. These rules clarify and refine issues that have arisen over the past 20 years and contain new and updated requirements.

The College of Central Florida provides technical assistance on testing accommodations for individuals with disabilities who take standardized exams and other high-stakes tests.

#### **What kinds of tests are covered?**

Exams administered relating to applications, certifications, or credentialing for postsecondary education, professional, or trade purposes are covered by the ADA and testing accommodations, pursuant to the ADA, must be provided. Examples of covered exams include:

- High school equivalency exams (such as the GED);
- College entrance exams (such as the PERT);
- Exams for admission to professional schools (such as the LSAT or MCAT);
- Admissions exams for graduate schools (such as the GRE or GMAT); and
- Licensing exams for trade purposes (such as cosmetology) or professional purposes (such as bar exams or medical licensing exams, including clinical assessments).
- Teacher made tests

### **What are testing accommodations?**

Testing accommodations are changes to the regular testing environment and auxiliary aids and services that allow individuals with disabilities to demonstrate their true aptitude or achievement level on standardized exams or other high-stakes tests. Examples of the wide range of testing accommodations that may be required include:

- Braille or large-print exam booklets;
- Screen reading technology;
- Scribes to transfer answers to Scantron bubble sheets or record dictated notes and essays;
- Extended time;
- Wheelchair-accessible testing stations;
- Distraction-free rooms;
- Physical prompts (such as for individuals with hearing impairments); and
- Permission to bring and take medications during the exam (for example, for individuals with diabetes who must monitor their blood sugar and administer insulin).

### **Who is eligible to receive testing accommodations?**

Individuals with disabilities are eligible to receive necessary testing accommodations. Under the ADA, an individual with a disability is a person who has a physical or mental impairment that substantially limits a major life activity (such as seeing, hearing, learning, reading, concentrating, or thinking) or a major bodily function (such as the neurological, endocrine, or digestive system). The determination of whether an individual has a disability generally should not demand extensive analysis and must be made without regard to any positive effects of measures such as medication, medical supplies or equipment, low-vision devices (other than ordinary eyeglasses or contact lenses), prosthetics, hearing aids and cochlear implants, or mobility devices. However, negative effects, such as side effects of medication or burdens associated with following a particular treatment regimen, may be considered when determining whether an individual's impairment substantially limits a major life activity.

A substantial limitation of a major life activity may be based on the extent to which the impairment affects the condition, manner, or duration in which the individual performs the major life activity. To be "substantially limited" in a major life activity does not require that the person be unable to perform the activity. In determining whether an individual is substantially limited in a major life activity, it may be useful to consider, when compared to most people in the general population, the conditions under which the individual performs the activity or the manner in which the activity is performed. It may also be useful to consider the length of time an individual can perform a major life activity or the length of time it takes an individual to perform a major life activity, as compared to most people in the general population. For example:

- The condition or manner under which an individual who has had a hand amputated performs manual tasks may be more cumbersome, or require more effort or time, than the way most people in the general population would perform the same tasks.

- A person whose back or leg impairment precludes him or her from sitting for more than two hours without significant pain would be substantially limited in sitting, because most people can sit for more than two hours without significant pain.

A person with a history of academic success may still be a person with a disability who is entitled to testing accommodations under the ADA. A history of academic success does not mean that a person does not have a disability that requires testing accommodations. For example, someone with a learning disability may achieve a high level of academic success, but may nevertheless be substantially limited in one or more of the major life activities of reading, writing, speaking, or learning, because of the additional time or effort he or she must spend to read, write, speak, or learn compared to most people in the general population.

#### **What testing accommodations must be provided?**

Testing entities must ensure that the test scores of individuals with disabilities accurately reflect the individual's aptitude or achievement level or whatever skill the exam or test is intended to measure. A testing entity must administer its exam so that it accurately reflects an individual's aptitude, achievement level, or the skill that the exam purports to measure, rather than the individual's impairment (except where the impaired skill is one the exam purports to measure).

**Example:** An individual may be entitled to the use of a basic calculator during exams as a testing accommodation. If the objective of the test is to measure one's ability to solve algebra equations, for example, and the ability to perform basic math computations (e.g., addition, subtraction, multiplication, and division), is secondary to the objective of the test, then a basic calculator may be an appropriate testing accommodation. If, however, the objective of the test is to measure the individual's understanding of, and ability to perform, math computations, then it likely would not be appropriate to permit a calculator as a testing accommodation.

#### **What kind of documentation is needed to support a testing accommodation request?**

All testing entities must adhere to the following principles regarding what may and may not be required when a person with a disability requests a testing accommodation.

Any documentation, if required by a testing entity in support of a request for testing accommodations, must be reasonable and limited to the need for the requested testing accommodations. Requests for supporting documentation should be narrowly tailored to the information needed to determine the nature of the candidate's disability and his or her need for the requested testing accommodation. Appropriate documentation will vary depending on the nature of the disability and the specific testing accommodation requested. Examples of types of documentation include:

- Recommendations of qualified professionals;
- Proof of past testing accommodations;

- Observations by educators;
- Results of psycho-educational or other professional evaluations; and
- An applicant's history of diagnosis.

Depending on the particular testing accommodation request and the nature of the disability, however, a testing entity may only need one or two of the above documents to determine the nature of the candidate's disability and his or her need for the requested testing accommodation. If so, a testing entity should generally limit its request for documentation to those one or two items and should generally evaluate the testing accommodation request based on those limited documents without requiring further documentation. Proof of past testing accommodations in similar test settings is generally sufficient to support a request for the same testing accommodations for a current standardized exam or other high-stakes test.

#### **Past Testing Accommodations on Similar Standardized Exams or High-Stakes Tests.**

If a candidate requests the same testing accommodations he or she previously received on a similar standardized exam or high-stakes test, provides proof of having received the previous testing accommodations, and certifies his or her current need for the testing accommodations due to disability, then a testing entity should generally grant the same testing accommodations for the current standardized exam or high-stakes test without requesting further documentation from the candidate. So, for example, a person with a disability who receives a testing accommodation to sit for the SAT should generally get the same testing accommodation to take the GRE, LSAC, or MCAT.

#### **Formal Public School Accommodations**

If a candidate previously received testing accommodations under an Individualized Education Program (IEP) or a Section 504 Plan, he or she should generally receive the same testing accommodations for a current standardized exam or high-stakes test. If a candidate shows the receipt of testing accommodations in his or her most recent IEP or Section 504 Plan, and certifies his or her current need for the testing accommodations due to disability, then a testing entity should generally grant those same testing accommodations for the current standardized exam or high-stakes test without requesting further documentation from the candidate. This would include students with disabilities publicly-placed and funded in a private school under the IDEA or Section 504 placement procedures whose IEP or Section 504 Plan addresses needed testing accommodations.

Example: Where a student with a Section 504 Plan in place since middle school that includes the testing accommodations of extended time and a quiet room is seeking those same testing accommodations for a high-stakes test, *and certifies* that he or she still needs those testing



accommodations, the testing entity receiving such documentation should generally grant the request.

### **Private School Testing Accommodations**

If a candidate received testing accommodations in private school for similar tests under a formal policy, he or she should generally receive the same testing accommodations for a current standardized exam or high-stakes test. Testing accommodations are generally provided to a parentally-placed private school student with disabilities pursuant to a formal policy and are documented for that particular student. If a candidate shows a consistent history of having received testing accommodations for similar tests, and certifies his or her current need for the testing accommodations due to disability, then a testing entity should generally grant those same testing accommodations for the current standardized exam or high-stakes test without requesting further documentation from the candidate.

Example: A private school student received a large-print test and a scribe as testing accommodations on similar tests throughout high school pursuant to a formal, documented accommodation policy and plan. Where the student provides documentation of receiving these testing accommodations, and certifies that he or she still needs the testing accommodations due to disability, a testing entity should generally grant the candidate's request for the same testing accommodations without requesting further documentation.

### **First Time Requests or Informal Classroom Testing Accommodations**

An absence of previous formal testing accommodations does not preclude a candidate from receiving testing accommodations. Candidates who are individuals with disabilities and have never previously received testing accommodations may also be entitled to receive them for a current standardized exam or high-stakes test. In the absence of documentation of prior testing accommodations, testing entities should consider the entirety of a candidate's history, including informal testing accommodations, to determine whether that history indicates a current need for testing accommodations.

Example One: A high school senior is in a car accident that results in a severe concussion. The report from the treating specialist says that the student has post-concussion syndrome that may take up to a year to resolve, and that while his brain is healing he will need extended time and a quiet room when taking exams. Although the student has never previously received testing accommodations, he may nevertheless be entitled to the requested testing accommodations for standardized exams and high-stakes tests as long as the post-concussion syndrome persists.

Example Two: A student with a diagnosis of ADHD and an anxiety disorder received informal, undocumented testing accommodations throughout high school, including time to complete tests after school or at lunchtime. In support of a request for extended time on a standardized exam, the student provides documentation of her diagnoses and their effects on test-taking in the form of a doctor's letter; a statement explaining her history of informal classroom accommodations for the stated disabilities; and certifies that she still needs extended time due to her disabilities. Although the student has never previously received testing accommodations through an IEP, Section 504 Plan, or a formal private school policy, she may nevertheless be entitled to extended time for the standardized exam.

### **Qualified Professionals**

Testing entities should defer to documentation from a qualified professional who has made an individualized assessment of the candidate that supports the need for the requested testing accommodations. Qualified professionals are licensed or otherwise properly credentialed and possess expertise in the disability for which modifications or accommodations are sought. Candidates who submit documentation (such as reports, evaluations, or letters) that is based on careful consideration of the candidate by a qualified professional should not be required by testing entities to submit additional documentation. A testing entity should generally accept such documentation and provide the recommended testing accommodation without further inquiry.

Reports from qualified professionals who have evaluated the candidate should take precedence over reports from testing entity reviewers who have never conducted the requisite assessment of the candidate for diagnosis and treatment. This is especially important for individuals with learning disabilities because face-to-face interaction is a critical component of an accurate evaluation, diagnosis, and determination of appropriate testing accommodations.

A qualified professional's decision not to provide results from a specific test or evaluation instrument should not preclude approval of a request for testing accommodations where the documentation provided by the candidate, in its entirety, demonstrates that the candidate has a disability and needs a requested testing accommodation. For example, if a candidate submits documentation from a qualified professional that demonstrates a consistent history of a reading disorder diagnosis and that recommends the candidate receive double time on standardized exams based on a personal evaluation of the candidate, a testing entity should provide the candidate with double time. This is true even if the qualified professional does not include every test or subtest score preferred by the testing entity in the psycho-educational or neuropsychological report.

**How quickly should a testing entity respond to a request for testing accommodations?**

A testing entity must respond in a timely manner to requests for testing accommodations so as to ensure equal opportunity for individuals with disabilities. Testing entities should ensure that their process for reviewing and approving testing accommodations responds in time for applicants to register and prepare for the test. In addition, the process should provide applicants with a reasonable opportunity to respond to any requests for additional information from the testing entity, and still be able to take the test in the same testing cycle. Failure by a testing entity to act in a timely manner, coupled with seeking unnecessary documentation, could result in such an extended delay that it constitutes a denial of equal opportunity or equal treatment in an examination setting for persons with disabilities.

**How should testing entities report test scores for test-takers receiving disability related accommodations?**

Testing entities should report accommodated scores in the same way they report scores generally. Testing entities must not decline to report scores for test-takers with disabilities receiving accommodations under the ADA.

Flagging policies that impede individuals with disabilities from fairly competing for and pursuing educational and employment opportunities are prohibited by the ADA. “Flagging” is the policy of annotating test scores or otherwise reporting scores in a manner that indicates the exam was taken with a testing accommodation. Flagging announces to anyone receiving the exam scores that the test-taker has a disability and suggests that the scores are not valid or deserved. Flagging also discourages test-takers with disabilities from exercising their right to testing accommodations under the ADA for fear of discrimination. Flagging must not be used to circumvent the requirement that testing entities provide testing accommodations for persons with disabilities and ensure that the test results for persons with disabilities reflect their abilities, not their disabilities.

To view model testing accommodation practices and for more information about the ADA, please visit [www.ADA.gov](http://www.ADA.gov) or call 1-800-514-0301 or 800-514-0383 (TTY); Monday to Wednesday and Friday, 9:30 a.m. – 5:30 p.m., or Thursday 12:30 p.m. – 5:30 p.m. Eastern Time.

## **The Most Common Disabilities Reported by College Students**

### **Cognitive Disabilities**

- Autism
- Learning Disability
- Processing Disability
- Reading Disability

### **Psychological Disorders**

- Anxiety
- Attention Deficit/Hyperactivity Disorder
- Depression
- Panic Disorder
- Post-Traumatic Stress Disorder

### **Sensory Impairments**

- Blind/Visually impaired
- Deaf or hard of hearing

### **Physical/Medical Conditions**

- Seizures
- Traumatic Brain Injury



## Anxiety

Includes Post Traumatic Stress Disorder (PTSD), specific phobia, Obsessive Compulsive Disorder (OCD), panic attacks and social anxiety.

Symptoms include:

- poor concentration
- avoidance of certain classes or places
- physiological symptoms
- poor stress management
- *Post-Traumatic Stress Disorder*: distressing memories, dreams, dissociative reactions such as flashbacks, and intense or prolonged psychological distress or physiological reactions toward the traumatic event(s). Avoidance of or efforts to avoid activities, places, or physical reminders, people, conversations or interpersonal situations that arouse recollection of the event. Increased frequency of negative emotional states, diminished interest or participation in significant activities, socially withdrawn behavior, or reduction in expression of positive emotions. Irritable behavior and angry outbursts, hypervigilance, exaggerated startle response, problems with concentration, or sleep disturbance.
- *Social Anxiety*: fear about one or more social situation and social situations almost always provoke fear or anxiety and are avoided or endured with intense fear/anxiety.
- *Specific Phobia*: marked fear or anxiety about a specific object or situation. The object or situation almost always provokes fear/anxiety and is actively avoided or endured with intense fear or anxiety. The fear is out of proportion to the actual danger.
- *Panic Disorder*: recurrent unexpected panic attack. An abrupt surge of intense fear or discomfort. Palpitations, pounding heart, accelerated heart rate, sweating, trembling or shaking, shortness of breath, feelings of choking, chest pain or discomfort, nausea, dizziness or light headedness, chills or heat sensations, derealization/depersonalization, fear of losing control, and/or fear of dying. Persistent concern or worry about additional panic attacks or their consequences is present. Significant maladaptive changes in behavior related to the attacks are also present.
- Presence of obsessions, compulsions, or both: *Obsessions*: thoughts, urges, or images that are experienced at some time during the disturbance as intrusive and unwanted and that, in most individuals, causes marked anxiety or distress. Attempts to ignore or suppress such thoughts, urges, or images are unsuccessful. *Compulsions*: repetitive behaviors or mental acts that the individual feels driven to perform in response to an obsession or according to rules that must be applied rigidly. The behaviors or mental acts are aimed at preventing or reducing anxiety or distress or preventing some dreaded event or situation; however, they are not connected in a realistic way with what they are designed to neutralize or prevent or are clearly excessive. The obsessions or compulsions are time consuming and/or cause clinically significant distress or impairment.

To register with Disability Services, documentation from a clinical or school psychologist, a licensed mental health counselor, or a physician is required. Documentation needs to be within three years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom, and state the recommended accommodations. The clinician needs to sign and date the document.

Available accommodations include:

- extended time for testing
- private or small room for testing
- white noise machine or soft music when testing
- service dog
- frequent breaks while testing or while in lecture
- permission to audio record lectures
- an assigned note-taker
- assistive technology such as Kurzweil
- allow assignments to be written; do not demand typed assignments
- reduced course load
- leniency with attendance

Remedies and coping tools for anxiety include: psychotherapy, medication management, exercise, meditation, diet, sleep, psychoeducation (understanding one's diagnosis). More resources are available at:

- American Psychiatric Association (2013). Diagnostic and statistical manual of mental disorders (5<sup>th</sup> ed.). Washington, DC: American Psychiatric Publishing.
- Anxiety Disorder Association of America, [www.adaa.org](http://www.adaa.org).

## Asperger's Syndrome

Asperger Syndrome (AS) is considered a Pervasive Developmental Disorder (PDD) at the higher functioning end of the autism spectrum. It is characterized by sustained impairment in social interaction and the development of restricted, repetitive patterns of behavior, interests and activities. In contrast to autism, *there are no obvious delays in language or cognitive development or in age-appropriate self-help skills and adaptive behaviors* though there are subtle impairments. Students with Asperger's Syndrome have difficulty referring to themselves, being empathetic of others, and being able to determine the emotions and thoughts of others. They may under or over use body gestures, have trouble looking others in the eye during conversation, reflect flat affect, have anxiety in social situations, or have nervous tics. They may also have a difficult time making friends and find communication difficult. May fail to share information that might interest other people or that can be important. For example, they are usually unaware that they need to tell the instructor when they are out because of illness or that they need to contact the instructor for help if they are struggling.

To register with Disability Services, documentation from a clinical or school psychologist, a licensed mental health counselor, or a physician is required. Documentation needs to be within 3 years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom, and state the recommended accommodations. The clinician needs to sign and date the document.

Available accommodations include:

- course substitution
- low distraction location for testing; private room where available
- not required to do group work
- allow student to present oral presentations before or after class or an alternate way of fulfilling oral presentation requirement.
- allow a longer verbal response time.
- allow important exchanges of information to be in written form including written rules for asking questions or participating in class discussion and other classroom logistics.
- note-taker
- assistive technology
- allow short class breaks (leave the classroom) to enable the student to take a 'social breather' depending on the length of the class.
- allow personal computer in class (even if for just a social buffer)
- allow hats, sunglasses and tinted lens glasses to be worn and allow ear plugs or ear phones
- preferential seating
- provide reader for testing if requested



Remedies and coping tools for Asperger's include: education about diagnosis, training in social skills, support, psychopharmacology, nutrition (gluten and casein free may help), complementary and alternative medicine, time management, tutoring, B-6 with Magnesium or another nutritional supplement Di-methylglycine (DMG), deep tissue massage for those who like touch, Career Coach. More resources are available at:

- Cohen, S. (2003). *The truth about the male and female brain*. Basic Books, Member of the Perseus Books Group: New York, NY.
- [http://www.medscape.com/viewarticle/460482\\_4](http://www.medscape.com/viewarticle/460482_4)
- [www.Autism-society.org](http://www.Autism-society.org)
- [www.udel.edu/bkirby/asperger](http://www.udel.edu/bkirby/asperger)
- <http://www.card.ufl.edu>

## Attention Deficit/Hyperactivity Disorder

Symptoms of ADHD include:

- hard time concentrating
- does not follow through
- loses focus
- unorganized
- easily forgets due to inability to place information in long term memory
- difficult time sitting still
- memory impairment due to inability to focus
- slow information processing speed
- impulsivity
- impairment in cognitive flexibility
- auditory-verbal list learning impairment
- depressed mood, irritability, low frustration tolerance, and/or anxiety due to behavioral, academic, or social problems.

To register with Disability Services, a DSM-V diagnosis on Axes I & II is needed, along with a summary report of psychological assessment data. The report must be printed on letterhead and the evaluator's licensing/certification information included. Also needed are:

- Individual intelligence test score not older than three years (WAIS-R, FSIZ, Distraction Index) that falls below the 'average' scores (below 90).
- Behavioral or cognitive processing tests, not older than three years, which document attention/concentration problems or other ADHD related symptoms. Scores must fall below 'average' scores (below 90).
- An interpretive summary is included that explains how the client's problems substantially limit functioning (i.e. a major life activity such as school or work) and explains why accommodations are needed.

Available accommodations, which should emphasize keeping students focuses on their work, include:

- note-taker
- extended time for testing (a timed test helps some students stay focused)
- small group for testing
- visuals for learning and testing
- use of computer in class to take notes
- books on tape
- preferential seating
- permission to audio record lectures

- copies of professor's overheads or PowerPoint presentation
- course substitution
- priority registration, reduced course load, extension of time line to graduate
- alternate examination format (oral, take home, project)
- assistive technologies such as Kurzweil or Read and Write
- use of headphones or earphones while testing
- breaks for testing

Remedies and coping tools for ADHD include: sleep schedule, diet, know the best study times, how to study, proper study environment, etc. (educate the student about themselves), use note taking skills (Cornell, Outline, Mapping, Charting, and Sentence), tutoring, coaching, psychotherapy, medications, limit distractions (free work area of distractions, work in quiet spot), do not study for extended periods of time; physical movement during breaks is good, specify time frame to complete task (use a timer), use white noise, chew gum, keep materials in file folder, use fidget objects to reduce tension, positive self-talk (i.e. instead of saying one is a "space cadet" reframe to "a visionary who sees the big picture"). More resources are available at:

- Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD) 1-800-233-4050
- Accommodating Adults with Disabilities in Adult Education, <http://files.eric.ed.gov/fulltext/ED461227.pdf>
- [www.ada.gov](http://www.ada.gov)

## **Auditory Perception**

The generic term Hearing Impairment is a word used to describe all types of hearing problems, ranging from a minute loss to profound deafness. Hard of hearing is a condition where hearing is compromised to varying degrees. Deaf/Deafness is a condition in which perceivable sounds have no meaning for ordinary life purposes. A Hearing Impairment means a total or partial loss of hearing function that impedes the communication process essential to language, educational, social and/or cultural interactions. The student may have difficulty processing information communicated through lectures or class discussions. He or she may have difficulty distinguishing subtle differences in sound or knowing which sounds to attend to. They may not be able to hear at all.

To register for accommodation with Disability Services, medical documentation is needed from licensed physician indicating a hearing impairment: audiogram or hearing report. Doctor must sign and date letter and state recommended accommodations for the classroom and testing environments.

Available accommodations include:

- closed captioning
- sign language interpreters
- FM system
- assistive technology
- preferential seating
- face me button
- note taker
- alternate location for testing that has reduced auditory and visual distractions
- visual aids and written supplements to spoken instructions

Other remedies include taking online classes, TTY/TDD (Teletypewriter/Text Display Device or Telecommunication Device for the Deaf) or Windows Media Player captioning feature. More resources are available at :

- “Accommodations: Assisting Students with Disabilities 2010 (3<sup>rd</sup> ed.)”
- <http://www.washington.edu/doit/academic-accommodations-students-learning-disabilities>
- <http://www.apa.org>
- <http://www.Deaf And Hard of Hearing/indexing-terms/deaf-and-hard-hearing>
- <http://www.hearingloss.org>
- <http://listen-up.org>

## **Autism**

Autism is a central nervous system dysfunction; onset during infancy or childhood.

Cognitive Ability: 60 percent under 50 IQ (Moderately impaired or delayed); 20 percent between 50-70 IQ (Moderately to mildly impaired or delayed); 20 percent have no retardation with a few of these being gifted (130+IQ).

Learning Characteristics: uneven development with and across skill areas, negative reaction to changes in routine or environment, overly selective to stimuli, difficulty with unstructured time or waiting, may not generalize skills to other areas or persons, or difficulty with abstract concepts.

Qualitative Impairment in reciprocal social interactions: lack of imaginative play early in life, difficulty relating to other people, strange fears, lack of awareness of feelings of others, abnormal seeking of comfort when distressed, impaired imitation, impairment in making peer friendships, lack of ability to express or understand emotions, difficulty understanding social cues, avoidance of eye contact or odd use of eye contact, want and need to be left alone at times, will initiate touching, but may not accept from others, inappropriate giggling or laughing.

Qualitative Impairment in verbal and nonverbal communication: 50 percent do not talk, abnormal nonverbal communication, low spontaneously initiated speech, no mode of communication for some, echolalia (meaningless repetition of another's person's spoken words), difficulty understanding concepts, long sentences, etc., problems answering questions, inappropriate timing and content, trouble staying on a topic unless one of their favorites, difficulty in conversing through comments and several exchanges. Restrictive repertoire of activities and interests: act as if deaf or very sensitive to some sounds, inappropriate attachments to objects, repetitive movements, stare at lights, shiny objects, patterns, enjoy rocking, jumping, swinging, explore environment by licking, smelling, and touching.

Can be obsessed with restricted areas of interest. Usually Inflexible in regards to routines or rituals. May have unusual repetitive mannerisms. Medical: possible seizures.

To register for accommodations with Disability Services, it is essential that the process of diagnosing Autism and related disabilities including the assessment and evaluation of an individual's development, communication, and social skills be completed. These can be retrieved from a medical professional, a psychiatrist, a clinical psychologist, a school psychologist, or a licensed mental health counselor. Knowing the areas of development that are affected and what accommodations will be most effective are crucial. Some screening tools include CHAT, M-CHAT, PDDST-II, STAT, ASQ, and High Functioning Autism Scale. Documentation must be signed and dated and describe how the diagnosis affects the student in the classroom and testing environments. Recommendations for accommodations must also be included.

Available accommodations include:

- course substitution
- low distraction location for testing; private room where available
- not required to do group work
- allow student to present oral presentations before or after class or an alternate way of fulfilling oral presentation requirement.
- allow a longer verbal response time
- allow important exchanges of information to be in written form including written rules for asking questions or participating in class discussion and other classroom logistics.
- note-taker
- extra time for testing
- assistive technology
- professor recognition (some students cannot distinguish between professor and students)
- allow short class breaks (leave the classroom) to enable the student to take a ‘social breather’
- depending on the length of the class.
- allow PC in class {even if for just a social buffer}.
- allow hats, sunglasses and tinted lens glasses to be worn and allow ear plugs or ear phones.
- preferential seating
- provide reader for testing if requested

Remedies and coping mechanisms include education about diagnosis, training in social skills, support, psychopharmacology, nutrition, complementary and alternative medicine, time management, tutoring, Career Coach. More resources are available at:

- Center for Autism and Related Disabilities (CARD)
- Vocational Rehabilitation
- *The ADVOCATE* a bi-monthly publication
- Autism support program at school level
- <http://www.nationalautismcenter.org/resources/for-families>
- <http://autism.sesamestreet.org>
- <https://www.retailmenot.com/blog/sensory-overload-while-shopping.html>
- <https://www.homecity.com/creating-a-home-where-your-child-can-thrive-with-a-disability>
- <https://www.cdc.gov/ncbddd/autism/links.html>
- <https://www.justgreatlawyers.com/estate-planning-for-parents-of-children-with-autism>
- <http://www.operationautismonline.org>
- <https://www.yourstoragefinder.com/moving-with-special-needs-kids>
- <https://www.iidc.indiana.edu/?pageId=601>
- [www.autism-society.org](http://www.autism-society.org)
- [www.project-ready.com](http://www.project-ready.com) (for new high school graduates)

## **Bipolar Disorders**

There are two types of bipolar.

**Bipolar I:** one or more major depressive episodes, inflated self-esteem or grandiosity, decreased need for sleep, more talkative than usual or pressure to keep talking, flight of ideas or subjective experience that thoughts are racing, distractibility, an increase in goal-directed activity or psychomotor agitation, and/or an excessive involvement in activities that have a high potential for painful consequences. Bipolar I is the most severe of the Bipolar Disorders. It is marked by extreme manic episodes and can include hallucinations.

**Bipolar II:** hypomanic, inflated self-esteem or grandiosity, decreased need for sleep, more talkative than usual or pressure to keep talking, flight of ideas or subjective experience that thoughts are racing, distractibility, increase in goal-directed activity or psychomotor agitation, excessive involvement in activities that have a high potential for painful consequences. The episodes are associated with an unequivocal change in functioning that is uncharacteristic of the individual when not symptomatic; episodes are not severe enough to cause impairment in functioning.

To register for accommodation with Disability Services, documentation from a psychiatrist, psychologist, licensed mental health counselor, or a primary care physician is required. Documentation needs to be within 3 years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom and while testing, and state the recommended accommodations. The clinician must sign and date the document.

Available accommodations include:

- extended time for tests
- small testing environment
- frequent breaks during testing and lectures
- alternative testing formats
- priority registration to ensure course load is not too strenuous
- reduced course load
- leniency with attendance
- allow water bottle and snacks in classroom and testing area
- assistive technology such as Kurzweil for a reader if one is not available
- books on tape
- arrangements with school nurse to have a place to nap
- routine time of day for testing
- extend time for assignments, if possible

Other remedies and coping mechanisms include psychotherapy, medication management, psychoeducation (understanding one's diagnosis), diet (different foods will create chemical

reactions in the body that effect mood), exercise (produces a natural “feel good” chemical in the body). More resources are available at:

- [www.nmha.org](http://www.nmha.org)
- [www.nami.org](http://www.nami.org)
- [www.nimh.nih.gov](http://www.nimh.nih.gov)
- [www.apa.org](http://www.apa.org)
- [www.psych.org](http://www.psych.org)



## **Chronic Health Conditions**

Symptoms vary as the health condition varies.

To register with Disability Services, current documentation needed from licensed health professional indicating specific diagnosis. Test results needed if applicable. Health professional should indicate how diagnosis affects the student in the classroom and testing environments. Recommended accommodations must also be listed along with the date and signature of health professional. Records need to be within the last three years.

Available accommodations include:

- note taker
- flexible attendance requirements
- extra exam time
- allowance for breaks
- accessibility of the campus and all its facilities; including the classroom.
- flexibility with attendance due to multiple doctor appointments
- assistive technology

Other remedies include medication management, exercise, diet, tutoring, sleep, know about your illness. Needs vary; contact your physician for more resources.

## Depression

Symptoms of depression include apathy, lack of motivation, fatigue, social withdrawal, problems with concentration and memory, suicidal statements, inconsistent class attendance.

To register with Disability Services, documentation from a psychiatrist, psychologist, licensed mental health counselor, or primary care physician is required. Documentation needs to be within 3 years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom and testing environments, and state the recommended accommodations. The clinician needs to sign and date the document.

Available accommodations include:

- extra time for testing
- quiet space for testing
- alternative testing formats
- regular time of day to test
- leniency with attendance
- ability to leave classroom temporarily for short breaks
- permission to audio record lectures
- note-taker
- assistive technology such as Kurzweil for the reader capability
- priority registration to ensure appropriate class load

Remedies and coping mechanisms include medication management, psychotherapy/counseling, psychoeducation, diet as foods effect mood, exercise (it produces endorphins which help one feel better emotionally), sleep (too much sleep will exacerbate symptoms and too little sleep with perpetuate them). More resources are available from:

- The Centers  
[www.thecenters.us](http://www.thecenters.us)  
717 S.W. Martin Luther King Ave., Ocala  
352-854-5300
- The Vines Hospital  
[www.thevineshospital.com](http://www.thevineshospital.com)  
3130 SW 27<sup>th</sup> Ave., Ocala  
352-671-3130
- NAMI (National Alliance of Mental Health), [www.nami.org](http://www.nami.org)
- The American Psychological Association, [www.apa.org](http://www.apa.org)

## **Eating Disorders**

There are several types of eating disorders, outlined below. Symptoms include inability to concentrate, medical problems such as kidney failure, muscle atrophy, and heart failure, and social isolation.

**Body Dysmorphic Disorder:** preoccupation with one or more perceived defects or flaws in physical appearance that are not observable or appear slight to others. Repetitive behaviors or mental acts in response to concerns regarding one's appearance such as mirror checking or comparing physical appearances.

**Bulimia Nervosa:** recurrent episodes of binge eating, eating at a discrete period of time and/or large amounts of food, a sense of lack of control over eating during episodes, recurrent inappropriate compensatory behaviors in order to prevent weight gain such as self-induced vomiting. Self-evaluation is unduly influenced by body shape and weight.

**Anorexia Nervosa:** restriction of energy intake relative to requirements; significantly low body weight in the context of age, sex, developmental trajectory, and physical health; intense fear of gaining weight or becoming fat; behaviors that interfere with weight gain; disturbance in the way one perceives their body weight/shape; lack of recognition of seriousness of current low body weight.

**Binge-Eating Disorder:** recurrent episodes of binge eating; eating a large amount of food at a discrete period of time; having a sense of lack of control over eating during the episodes; eating much more rapidly than normal; eating until feeling uncomfortably full; eating large amounts of food even when not physically hungry; eating alone because of feelings of embarrassment; feeling disgusted with oneself, depressed, or very guilty afterward.

To register with Disability Services, documentation from a psychiatrist, psychologist, licensed mental health counselor, or primary care physician is required. Documentation needs to be within 3 years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom and testing environments, and state the recommended accommodations. The clinician needs to sign and date the document.

Available accommodations include:

- extra time for testing
- quiet testing area
- leniency with attendance
- teacher can help by being body positive and not discussing diagnosis in front of or with student

Other remedies include medical treatment, medication management, psychotherapy, psychoeducation. More resources are available at:

- American Psychiatric Association (2013). “Diagnostic and Statistical Manual of Mental Disorders (5<sup>th</sup> ed.)” Washington DC: American Psychiatric Publishing.
- <http://www.nationaleatingdisorders.org>
- <http://www.mirror-mirror.org>
- <https://medlineplus.gov>
- [www.apa.org](http://www.apa.org)

## Epilepsy

Epilepsy symptoms include: seizures, physical movements may be altered for a brief time, blackouts or periods of confused memory, episodes of staring or unexplained periods of unresponsiveness to include inability to speak, fainting spells with incontinence or followed by excessive fatigue, odd sounds, distorted perceptions, episodic feelings of fear that cannot be explained, frequent absences, heat exhaustion and hypoglycemia.

To register with Disability Services, documented medical history from doctor on letter head with doctor signature and date must be provided. Letter must also include how the diagnosis affects the student in the classroom and testing environments, the recommended accommodations, and written within the last three years. Also needed are: electroencephalograph (EEG), computerized tomography (CT) scan, magnetic resonance imaging (MRI) scan, or positron emission tomography (PET) scan.

Available accommodations include:

- gain written approval for teacher to call 911 and/or parent in case of episode
- low lighting
- frequent breaks from any computer work to include taking tests
- ability to wear sunglasses in class or while testing
- notice regarding being absent
- use of headphones or earphones while testing
- extra time for testing
- flexible attendance
- an agreed upon extenuation of time to complete assignments per the instructor and student

Remedies include medications, surgery, a ketogenic diet. More resources are available at:

- <http://www.epilepsy.com>
- <https://www.ninds.nih.gov>
- [www.ada.gov](http://www.ada.gov)
- <http://www.epilepsy.com>

## Learning Disabilities

A learning disorder (LD) can cover an array of disorders which include: reading, writing, listening, speaking, reasoning, mathematics, thinking, socializing, organization, language, and fine and gross motor control. This is not an exhaustive list by any means. Specific LD is a chronic condition of presumed neurological origin which selectively interferes with the development, integration and/or demonstration of verbal and/or nonverbal abilities as a distinct handicapping condition and varies in its manifestations and in degree of severity. Common symptoms associated with an LD are: reading well but not writing well, or vice versa; having a short attention span or a tendency to be impulsive or easily distracted; misinterpreting language or having difficulty understanding what is said; hearing sounds, words or sentences imperfectly; difficulty following a schedule, being on time or meeting deadlines; getting lost easily, either driving or finding your way in a large building; misreading or miscopying; confusing similar letters or numbers, reversing them or misreading their order; difficulty in reading the newspaper, distinguishing small print or following columns; difficulty explaining ideas in writing, not orally; difficulty in completing job applications; difficulty with math, math language and math concepts; reversing numbers in a checkbook or having a hard time balancing it; confusing right and left, up and down; inability to restate what has just been said.

To register with Disability Services, a psychoeducational evaluation is required. It will include the tests given, the results of the test, how the disability affects the student's ability to learn in the classroom and take tests, and the recommended accommodations. The evaluation must be within three years old unless the student was 18 years old or older when the tests were conducted and has not had any medical issues that could have affected their cognitive abilities. A psychoeducational evaluation may be obtained from a licensed school psychologist or a clinical psychologist.

Available accommodations include:

- note taker
- audio record lectures
- additional time to complete tests and assignments
- test in room with reduced distractions
- use of assistance technology
- option for oral exams or alternative testing procedures
- scratch paper for exams
- frequent breaks
- use of headphones or earphones while testing

For remedies and coping mechanisms, see the specific learning disabilities that follow. More resources are available at:

- Operation College Resource Manual: Learning Disabilities CAESC – Volume II - 2001
- [http://floridaliteracy.org/literacy\\_resources\\_teacher\\_tutor\\_learning\\_disabilities.html](http://floridaliteracy.org/literacy_resources_teacher_tutor_learning_disabilities.html)
- [www.Idanatl.org](http://www.Idanatl.org)

### **Mathematics Characteristics Associated with Learning Disabilities**

Doesn't remember and/or retrieve math facts; doesn't use visual imagery effectively; has visual-spatial deficits; becomes confused with math operations, especially multi-step processes; has difficulties in language processing that affect the ability to do math problem-solving; reads numbers backwards; inconsistent mastery of math facts due to long term memory; difficulty with left/right orientation; confuses similar numbers and transposes them; or confuses part-whole relationship.

To register with Disability Services, current documentation (within past three years or at least tested as an adult age 18 or older, without recent medical issues) from a clinical psychologist or school psychologist is needed with test results showing a deficiency in math computation or a letter from a licensed mental health counselor indicating a DSM-V diagnosis of a math learning disorder. Letter must be signed and dated and on business letter head.

Available accommodations include:

- permission to audio record lectures
- extended time for testing
- talking calculator/fractional, decimal, or statistical scientific calculator
- quiet test area
- use of assistive technology
- use of scratch paper
- note taker

Other remedies and coping tools include:

- YouTube videos of math instruction
- tutoring
- practice math skills daily or every other day
- use picture formulas to accompany simple algebraic word problems
- mnemonics (memory tools)
- formula cards
- choose your instructor wisely
- take good notes
- graphic organizer
- MathPlayer
- scientific notebook
- math software
- calculator with special features or large keys and/or display

More resources are available at:

- <http://fldoe.org/core/fileparse.php/7690/urlt/0070069-accomm-educator.pdf>
- <https://www.understood.org/en/learning-attention-issues/child-learning-disabilities/dyscalculia/understanding-dyscalculia>
- <http://www.dyscalculia.org>

## **Mobility/Motor Impairment**

Symptoms of mobility and motor impairment include: body's lack of a full range of motion; fatigue; speech impairment; difficulty controlling mouth, speaking, or eating; partial or total loss of function of a body part, usually a limb or limbs; muscle weakness; lack of muscle control, to include the eyes.

To register with Disability Services, medical documentation, no older than three years, is needed from a licensed medical professional. Must include diagnosis/ailment, how it affects the student in the classroom and testing environments, and recommended accommodations. Must be signed and dated and on business letter head.

Available accommodations include:

- note taker, scribe
- assistive technology
- wheelchair friendly furniture and room arrangement
- extended time for completion of activities, unless speed is the essential element being tested.
- provide lab partner or assistant who can facilitate involvement in a lab activity
- allow extra time to set up a lab or complete the work
- provide an adjustable work station
- audio record lectures
- lab partner
- leniency with attendance due to multiple medical appointments
- extra time for testing

Other remedies include calling security if a ride to class is needed and a handicapped parking decal. More resources are available at <https://www.ada.gov/opdmd.htm>.



## Narcolepsy

Narcolepsy is a disorder characterized by sudden and uncontrollable bouts of deep sleep, sometimes accompanied by paralysis and hallucinations.

To register with Disability Services, medical documentation, no older than three years, is needed from a licensed medical professional. Must include diagnosis/ailment, how it affects the student in the classroom and testing environments, and the recommended accommodations. Must be signed and dated and on doctor letter head.

Available accommodations include:

- note-taker
- audio record lectures
- extended time for testing
- breaks during testing
- drink in closed container during testing
- ability to exit and reentry classroom in least disruptive way possible in order to take a quick walk around the hall to stay mentally alert.
- priority registration to get classes at their most alert times of day
- quiet environment for testing with monitoring
- flexible attendance

Other remedies include medication management, schedule naps into day, schedule classes during most alert times of day, sleep alarm, and know sleep patterns. More resources at:

- Young Adults with Narcolepsy (YAWN)
- <http://www.sleepdisorderhelp.com/index.cfm?ID=25>
- <http://forums.narcolepsynetwork.org/index.php?/forum/9-generation-zzz-teensyoung-adults>
- <http://www.wakeupnarcolepsy.org/about-narcolepsy/what-is-narcolepsy>

## Processing Disability (Visual, Auditory, Learning)

Symptoms include:

**Visual:** hindered ability to make sense of information taken in through the eyes. Difficulties with visual processing affect how visual information is interpreted or processed by the brain. Difficulty perceiving words and numbers as separate units, directionality problems in reading and math, and/or confusion of similar shaped letters. *Visual closure:* inability to identify or recognize a symbol or object when the entire object is not visible. *Visual agnosia:* inability to visually recognize objects which are familiar to them that they can recognize through their other senses. *Whole/part relationships:* inability to perceive or integrate the relationship between an object or symbol in its entirety and the component parts which make it up. *Visual motor integration:* inability to use visual cues to guide the student's movements. Students have difficulty orienting themselves in space, especially in relation to other people and objects.

**Auditory:** inability to analyze or make sense of information taken in through the ears. How the information is interpreted or processed by the brain is affected. It can interfere with speech and language and affect the student's ability to learn how to read and spell. They may have difficulty understanding the lesson or directions when given verbally. The inability to recognize or isolate individual sounds in a word, recognize similarities between words, or recognize the number of sounds in a word. These deficits can affect all areas of language including writing and spoken language. *Auditory discrimination:* difficulty recognizing differences in sounds to include the ability to identify words and sounds that are similar and those which are different. *Auditory memory:* inability to store and recall information which was given verbally. Students may not be able to follow instructions given verbally or may have trouble recalling information from a story read aloud. *Auditory sequencing:* inability to remember or reconstruct the order of items in a list or the order of sounds in a word or syllable. *Auditory blending:* inability to put together sounds to form words.

**Learning:** *dyslexia:* when learning affects the area of language processing and reading. Difficulties may also be seen in writing, spelling and speaking. *Dyscalculia:* difficulties in math computation and memory of math facts and concept. *Dysgraphia:* difficulties with spelling, putting thoughts into written language, or motor aspects of writing. *Dyspraxia:* difficulties in the area of motor skill development.

To register with Disability Services, a letter from the doctor on their letter head with the outcomes of the visual and/or auditory test showing the deficit, explaining how the deficit affects the student in the classroom and testing environments, and the accommodations the doctor recommends is needed. For a processing disability due to learning or cognition the student needs

to bring the psychoeducational evaluation from a licensed school psychologist or clinical psychologist to the institution. All documents need to be within the past three years.

Available accommodations include:

- *Visual*: enlarged print of texts, papers, worksheets, tests and other materials; paper with bold or raised lines; have the instructor read aloud what is being written on the board; extra time for testing; quiet room for testing; and audio record lectures.
- *Auditory*: supplement oral directions with written or visual cues; simplify verbal directions; audio record lectures; and extra time for testing – especially for written responses.
- *Learning*: extra time for testing, quiet area for testing, audio record lectures, assistive technology, note-taker, priority registration, audio books, alternative formats for tests, permission to use PC for writing assignments and note-taking, and/or a scribe.

Other remedies include: homeopathy, cognitive practice, salt therapy, dietary alterations, herbs, melatonin, speech therapy, auditory training therapy. More resources at:

- <https://ldaamerica.org/types-of-learning-disabilities>
- <https://www.brainbalancecenters.com/who-we-help/processing-disorders>
- <http://www.ldonline.org/article/6390>

## Reading Disability

Symptoms of a reading disability include weakness in phonological memory; deficits in auditory phonemic processing; deficits in phonological awareness; may also include attention/executive functioning deficit (hearing ability); may also include visual processing deficits.

To register with Disability Services, a doctor's note stating the neuropsychological weaknesses of the student (ex.: left planum temporale asymmetry, cellular anomalies, metabolic abnormalities, decreased grey matter in the left temporal lobe, reduced size of the posterior corpus callosum, impairment of the magnocellular visual pathway, etc.), MRI scan showing abnormalities of the left hemisphere, or a psychoeducational evaluation indicating a reading disability (any score below 90) is needed. Notes must be printed on letterhead and the evaluator's licensing/certification information included along with the doctor's signature. All documents must be within the last three years.

Available accommodations include:

- extended time on tests
- Kurzweil reading assistive technology
- Dragon
- use of computer in class to take notes
- paper copies of exams
- alternate examination format (oral, take home, project)
- reader for examinations
- scribe for examinations
- books on tape
- permission to audio record lectures
- note taker
- copies of professor's overheads or PowerPoint presentation
- course substitution-Foreign language
- priority registration, reduced course load, extension of time line to graduate
- frequent breaks
- talking calculator
- use of headphones or earphones while testing

Other remedies include participate in a transition program or vocational rehabilitation program; read, read, read; Bookhare.org; TextHELP; tutoring, highlighters; study guides. More resources are available at:

- <http://ldaamerica.org/>
- [www.fldoe.org/schools/higher-ed/fl-college-system/academic-student-affairs/disability-support-services.st](http://www.fldoe.org/schools/higher-ed/fl-college-system/academic-student-affairs/disability-support-services.st)
- <https://www.ada.gov/cguide.htm>

## Schizophrenia Disorder

Symptoms include: disorganized speech, inappropriate social skills, apathy, visual and/or auditory hallucinations, paranoia, difficulty with daily living, delusions, concrete thought processing.

To register with Disability Services documentation from a psychiatrist, psychologist, licensed mental health counselor, or primary care physician is required. Documentation needs to be within 3 years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom and testing environments, and state the recommended accommodations. The clinician needs to sign and date the document.

Available accommodations include:

- preferential seating
- note taker or photocopy of another student's notes
- tape recorder use
- early availability of syllabus and textbooks
- priority registration
- prearranged or frequent breaks during lectures
- beverages permitted in class
- exams in alternate format (e.g., from multiple choice to essay; oral, presentation, role-play, or portfolio)
- use of assistive computer software (e.g., allowing scanned text to be read aloud by the computer's sound card; or speech recognition for converting the spoken word to printed word on the computer screen)
- extended time for test taking
- exams individually proctored
- exam in a separate, quiet, and non-distracting room
- permission to submit assignments handwritten rather than typed.
- written assignments in lieu of oral presentations or vice versa.
- assignments completed in dramatic formats (e.g., demonstration, role-play, and sculpture).

Other remedies include medication management, regular check-ups with primary doctor and psychiatrist, safe and secure home environment, psychosocial assistance, life coach, psychotherapy, take online classes. More resources at:

- <https://www.nimh.nih.gov/health/topics/schizophrenia/raise/index.shtml>
- <https://www.nami.org/Learn-More/Mental-Health-Conditions/Schizophrenia>
- <https://www.thecenters.us>
- [www.thevineshospital.com](http://www.thevineshospital.com)
- Dial 2-1-1

## Short-term Memory Impairment

Symptoms include an inability to transfer short term memory into long term memory, inability to recall information, difficulty with abstract reasoning, difficulty with oral instructions, difficulty constructing paragraphs.

To register with Disability Services, must show results of cognitive assessments that measure memory deficits; such as a psychoeducational evaluation, or medical documentation that signifies a memory deficit (that can also include an MRI or neurological exam). Documentation needs to be within the past three years unless the student was age 18 or older when assessed and has not had any medical complications. Documentation should also include how the diagnosis affects the student in both the classroom and testing environments and needs to have the recommended accommodations listed.

Accommodations for visual processing: difficulty in recognizing and synthesizing visual information (VP), short-term memory: information not rehearsed (STM), working memory: information not understood (WM), and fluid reasoning: the reorganization, transformation, and extrapolation of information (FR) are available. Accommodations include:

- audio record lectures (WM & FR)
- use of a talking calculator (VP)
- use of a graphic calculator (WM & FR)
- note taker (all)
- large print (VP)
- use of headphones or earphones while testing (all)
- alternative testing procedures if applicable
- extended time for testing

Other remedies include use of diagrams or visual mapping, frequent review and practice, color-coded notes, flash cards, tutoring, formula sheets, use of a step-by-step checklist for completing tasks, writing tasks to be completed in small steps. More resources at:

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3430800>
- [http://www.fldoe.org/core/fileparse.php/5398/urlt/311201\\_acmod-voc.pdf](http://www.fldoe.org/core/fileparse.php/5398/urlt/311201_acmod-voc.pdf)
- <http://www.webmd.com/brain/memory-loss#1>
- <http://www.mayoclinic.org/diseases-conditions/alzheimers-disease/in-depth/memory-loss/art-20046326?pg=2>
- <https://ldaamerica.org/types-of-learning-disabilities/memory>

## **Speaking characteristics associated with learning disabilities**

Some learning disabilities present speech problems such as mispronouncing words; using wrong word, usually with similar sounds; confusing the morphology, or structure, of words; a limited vocabulary; grammatical errors; speaking with a limited repertoire of phrase and sentence structure; difficulty organizing a topic; or difficulty with word retrieval. Student may also have difficulties with vocabulary.

To register with Disability Services, a letter is needed from a licensed speech therapist indicating deficiency in speech by speech test results; a letter from licensed mental health counselor indicating a DSM-V code of speech impediment; or a medical doctor's note indicating a medical issue effecting speech, such as a mouth deformity, a neurological issue, a hearing deficit, etc. Documentation needs to be within the past three years unless the student was 18 or older when last tested. A signature of the clinician who diagnosed is required along with a description of how the diagnosis affects the student in both the classroom and testing environments. Recommended accommodations for classroom and testing are needed.

Available accommodations include:

- allow student time to think about what they want to say and how they will say it.
- use of visuals to help student convey the spoken language through pictures, drawings, or other graphics.
- use of thesaurus or dictionary
- assistive technology
- use of headphones or earphones while testing
- alternate assignment for oral presentations
- flexibility with in-class discussions

Other remedies include using a checklist, cue card, or reference card for editing; electronic dictionary with spell check; individualized spelling list; speech therapist. More resources at:

- <http://files.eric.ed.gov/fulltext/ED565777.pdf>
- <https://www.understood.org/en/learning-attention-issues/child-learning-disabilities/issues-involving-spoken-language/difference-between-speech-disorders-and-language-based-learning-disabilities>
- <https://www.understood.org/en/learning-attention-issues/child-learning-disabilities/issues-involving-spoken-language/why-is-my-child-having-trouble-pronouncing-words>
- <https://medlineplus.gov/ency/article/001430.htm>

## Tourette's Syndrome

The primary symptom of Tourette's Syndrome is tics. Tics are involuntary, can be rapid or slow and purposeful, repetitive, and stereotyped movements of individual muscle groups. Tics can be categorized as motor, vocal, or behavioral. Tics include, but are not limited to, eye blinking, nose puckering, grimacing, and squinting. Vocal tics can be meaningless sounds or noises, such as hissing, coughing, or barking. Complex vocal tics involve meaningful words, phrases, or sentences such as, "Oh boy, now you've done it," or even curse words. Transient vocalizations are less common and include various throat sounds, humming or other noises. Motor tics, also sometimes known as compulsions, can include repeating an action several times; such as stretching out an arm ten times before writing. These examples are in no way an exhaustive list. Many more examples can be found in the resource section below. Males are four times more likely to be afflicted with Tourette's than females.

To register with Disability Services, documentation from a psychiatrist, psychologist, licensed mental health counselor, or primary care physician is required. Documentation needs to be within 3 years, show the test results confirming the diagnosis, indicate how the diagnosis affects the student in the classroom and testing environments, and state the recommended accommodations. The clinician needs to sign and date the document.

Available accommodations include:

- frequent breaks during lectures and testing
- extended time for testing
- priority registration
- preferential seating
- audio record lectures
- note-taker
- low distraction location for testing
- use of assistive technology such as Kurzweil
- alternate form of testing
- ability to type assignments

Other remedies include medication, avoid ephedrine if at all possible, education on syndrome, psychotherapy. More resources are available from the Tourette Association of America, [www.tourette.org](http://www.tourette.org).



## Traumatic Brain Injury

Symptoms of a TBI include:

- Cognitive: amnesia, inability to speak or understand, mental confusion, difficulty concentrating, difficulty thinking and understanding, inability to create new memories, or inability to recognize common things
- Behavioral: abnormal laughing and crying, aggression, impulsivity, irritability, lack of restraint, or persistent repetition of words or actions
- Whole body: balance disorder, blackout, dizziness, fainting, or fatigue
- Mood: anger, anxiety, apathy, or loneliness
- Eyes: dilated pupil, raccoon eyes, or unequal pupils
- Gastrointestinal: nausea or vomiting
- Speech: slurred speech or impaired voice
- Visual: blurred vision or sensitivity to light

Also common: persistent headache, a temporary moment of clarity, bleeding, bone fracture, bruising, depression, loss of smell, nerve injury, post-traumatic seizure, ringing in the ears, sensitivity to sound, or stiff muscles.

To register with Disability Services, current documentation from a medical doctor is needed on letterhead with date and signature of doctor indicating diagnosis and how it affects the student in the classroom. Recommended accommodations should also be included in letter. A psychoeducational evaluation from a licensed school psychologist or clinical psychologist is also acceptable. Documentation cannot be older than three years if the student was under the age of 18.

Available accommodations include:

- note taker or copies of notes
- extra time for testing
- alternative testing location
- use of assistive technologies
- audio record lectures
- frequent breaks from lectures and testing
- low distraction location for testing

Other remedies include psychotherapy, surgery or medication. More resources at [www.mayoclinic.org](http://www.mayoclinic.org) and [www.traumaticbraininjury.com](http://www.traumaticbraininjury.com).

## Visual Impairment

A visual impairment exists when a student cannot see at all or has low visibility. A student with a visual processing disorder has great difficulty in recognizing and synthesizing visual information. They may also have difficulty distinguishing subtle differences in shape, deciding what images to focus on when multiple images are present, skip words or repeat sections when reading, or misjudge depth or distance. Student may have difficulty processing information communicated via overhead projection, through video, in graphs and charts, by email, or within web-based distance learning courses.

To register with Disability Services, a letter is needed from the doctor indicating the degree of visual impairment or vision screening results, how this impairment affects the student while test taking and during classroom activities, and the recommended accommodations. Documents should not be older than three years if the student was under the age of 18.

Available accommodations include:

- braille
- extra time for test taking
- scribe
- audio record lectures
- use of assistive technology such as JAWS, screen reader, or color contrasting
- enlarged text
- magnifying equipment such as ZoomText
- reduced glare or direct lighting (ex. color overlay filter)
- face me button
- contrast-enhanced printed materials
- electronic format of syllabi, assignments, readings, resources
- talking calculator
- Duxbury Braille Translator
- QuickTac and TGD-Pro

Other remedies include a tutor, ruler or guide to isolate line of text, large key keyboards. More resources at:

- <http://fldoe.org/core/fileparse.php/7690/urlt/0070069-accomm-educator.pdf>
- <https://www.afb.org>
- [www.learningally.org](http://www.learningally.org)
- <http://www.hadley.edu/default.asp>
- <http://dbs.myflorida.com>
- <http://www.rehabworks.org>

## **Writing Disability**

A writing disability may be present if a student has difficulty communicating through writing, written output is severely limited, writing is disorganized, lacks a clear purpose for writing, does not use the appropriate text structures, shows persistent problems in spelling, has difficulties with mechanics of written expression, handwriting is sloppy and difficult to read, and/or demonstrates difficulties in revising.

To register with Disability Services, a psychoeducational or clinical assessment documenting disability or DSM-V diagnosis from licensed mental health clinician is needed. The letter must also include how the disability affects the student in the classroom and while testing and list recommendations of accommodations. Assessment cannot be older than three years if the student was under the age of 18 when last tested.

Available accommodations include:

- assistive technology and/or word prediction software
- extended time on exams and assignments
- audio recorded lectures
- note taker
- alternative testing arrangements/locations
- oral exam option
- frequent breaks
- scribe
- use of headphones or earphones while testing

Other remedies include:

- personal word list
- visual cues on paper (stop, start, margins)
- word processor with spell check and grammar check
- specialized writing paper – colored or raised lines, gridded paper
- handwriting guide
- thesaurus or dictionary
- checklist, cue card, or reference card for editing
- highlight key words
- writing lab
- tutoring
- adaptive devices such as pencil grips, erasable pens, or graph paper
- AlphaSmart
- writing templates
- electronic/talking spell checker/dictionary

More resources are available at:

- <http://fldoe.org/core/fileparse.php/7690/urlt/0070069-accomm-educator.pdf>
- <http://www.fldoe.org/schools/higher-ed/fl-college-system/academic-student-affairs/disability-support-services.stml>
- <http://www.ldonline.org/article/33070>
- <http://www.pbs.org/parents/education/learning-disabilities/types/writing/signs-of-a-writing-disability>
- <https://www.google.com/search?q=paragraph+writing+worksheets&tbm=isch&tbo=u&source=univ&sa=X&ved=0ahUKEwjWx-SlzczUAhUGYiYKHURqBkAQsAQIKQ&biw=1280&bih=905>

## Resources

**American Academy of Psychiatry and the Law**

<http://www.aapl.org/>

**American Psychiatric Association**

[www.psych.org](http://www.psych.org)

**American Psychological Association**

<http://www.apa.org/>

**Anxiety Disorder Association of America**

[www.adaa.org](http://www.adaa.org)

**The Assistive Technology Act of 2004**

<http://www.gpo.gov/fdsys/pkg/STATUTE-118/pdf/STATUTE-118-Pg1707.pdf>

**EnableMart School Health Corporation (Assistive Technology Provider)**

<https://www.enablemart.com>

**Maxi Aids (Assistive Technology Provider)**

<https://www.maxiaids.com/>

**BayCare**

[www.baycare.org/sap](http://www.baycare.org/sap)

1-800-878-5470

**The Center for Universal Design in Education**

[www.uw.edu/doi/CUDE](http://www.uw.edu/doi/CUDE)

**The Centers**

[www.thecenters.us](http://www.thecenters.us)

5664 S.W. 60<sup>th</sup> Ave., Ocala

352- 291-5500

**National Mental Health Association**

<http://www.mentalhealthamerica.net>

**National Alliance on Mental Illness**

[www.nami.org](http://www.nami.org)

**National Institute of Mental Health**

[www.nimh.nih.gov](http://www.nimh.nih.gov)

**The Sylvan Learning Center**

[www.sylvanlearning.com](http://www.sylvanlearning.com)

3231 S.E. Maricamp Road, Ocala

352-364-4548

**The Vines Hospital**

[www.thevineshospital.com](http://www.thevineshospital.com)

3130 S.E. 27<sup>th</sup> Ave., Ocala

352-671-3130

**The Institute for Higher Education Policy**

[www.ihep.org](http://www.ihep.org)