



Check if you are a client of a rehabilitation agency:

- Blind Services
- Vocational Rehabilitation
- Veterans Administration/Vocational Rehabilitation (Chapter 31)
- Other (specify): \_\_\_\_\_

Documentation of your disability must be sent to this office. Before submitting your documentation, review the documentation guidelines on the CF website at [www.cf.edu/go/assistance/disability/register/doc-guidelines](http://www.cf.edu/go/assistance/disability/register/doc-guidelines).

Important Note: All documentation must be no older than three years.

Are you submitting documentation with this form?  Yes  No, will send separately

If no, when do you intend to submit your disability documentation? \_\_\_\_\_  
MM/YY

Do you suffer from any medical disorder(s) that cause serious reactions we need to be aware of, such as seizures or dysthymia?

What will be your biggest challenge as a college student?

What can we do to help you reach your academic goals?

