

FACULTY NOTIFICATION FORM

CHECK IF CONDITIONAL

Date: 9/26/2011

The following student has signed a written waiver giving permission to share this information with you. Please remember, this information is PRIVILEGED and CONFIDENTIAL. Use it for educational purposes only.

Student ID#: 0

Student: Program:

Advisor: D.O.E.

Learning Problem:

The following accommodations and modifications have been determined to be appropriate for this student based on the Guidelines for Documenting a Disability at Paul Smith's College.

It is the student's responsibility to request these accommodations directly to the faculty, and the faculty's responsibility to assure that accommodations are being met. Faculty who are unable to provide such accommodations on their own may request assistance from the Center for Accommodative Services (CAS).

Dictate essays (speech-to-text technology)

Dictate essays (speech-to-text technology)

Dictate essays (speech-to-text technology)

Faculty: This form is to be signed by you in the presence of the student.

Course Prefix & number	Faculty name (printed)	Signature	Date

I will provide 24 hours notice before accessing testing accommodations. I will sign up for finals by date posted in Center for Accommodative Services (CAS) office, Weill Library Room 209.

Student Signature

Learning Specialist