Disability Services Center (DSC) Student Responsibilities Checklist (Revised 8/28/14)

The DSC, within the Sagan Academic Resource Center (SARC) provides reasonable academic accommodations according to ADA, as amended and DSC follows regulations of Section 504 of the Rehabilitation Act for college students with disabilities. As a student with a disability I agree to the procedures and conditions listed below. I am responsible for:

____ 1. **Checking in at the front desk** and then waiting for my name to be called. In the event I am 15 minutes late, I will reschedule my appointment.

____ 2. **Initiating contact with the DSC to disclose my disability**, completing an intake interview, and providing the required documentation of my disability to the Disability Services Coordinator.

____ 3. **Completing an accommodations appointment** with DSC during week 1 or 2 of each semester that I am requesting academic accommodations. At this appointment I will receive verification forms and share them with my professors, as soon as possible, and no later than week 3. I understand this process is required in order to obtain my accommodations. Furthermore, I understand sharing my Student/Faculty Reasonable Accommodation Plan forms with professors is my sole responsibility.

____ 4. **Returning the top (signed) copy of the Student/Faculty Reasonable Accommodation plan** for each class to the front desk of the SARC by the end of week 3 to complete the accommodation process.

____ 5. **Arranging testing accommodations** with my professor and the DSC at least 3 business days prior to a regular test and 5 business days prior to a midterm or final. When necessary testing in the SARC is scheduled between 9:00am and 4:45pm Monday through Friday and must be prearranged as stated. I understand that without proper notice, testing accommodations are not guaranteed. If I need a dedicated proctor, I am required to notify DSC 2 weeks in advance.

____ 6. **Taking my own notes**, unless there is reasonable evidence as discussed with DSC that I am not able to take my own notes. I understand that a peer note taker is considered supplemental to my own notes. Furthermore, I understand that attendance in class is required to receive supplemental notes from a peer note taker.

____ 7. **Giving permission to the Coordinator of Disability Services** or whoever is acting on his/her behalf to discuss my accommodations with appropriate OWU faculty and staff. I have been educated on my role as well as the role of faculty/staff in providing accommodations.

Thank you for your cooperation.

Student Name (signature): ___________________________ Date: __________

Disability Services Coordinator (signature): _______________ Date: __________