



Center for Students with Disabilities
Application for Accommodation Services

Please note that this form needs to be completed as part of your application for disability services

Demographic Data: Please complete and/or review and update:

Name: Last First MI Date:

Student ID# Date of Birth (Month/Date/Year)

Campus Address Res Hall Street City State Zip code

Permanent Address Street City State Zip code

Phone Numbers: Campus () Permanent () Cell ()

Preferred Email: Campus Email:

Semester that you are applying for: Fall Spring Summer

Student Status (circle one): Prospective Undergraduate Undergraduate Transfer Graduate/Professional Special/Guest

I have completed an application for admissions to UW-Whitewater: Please circle one: Yes No

Grade Point Average: Number of Credits Completed to date: Anticipated graduation date:

Are you a DVR/DORS client? Circle one: Yes No Not applicable to me No, but I would like to learn more.

Are you a Veteran or receiving Veterans Benefits: Circle one: Yes No

Diagnostic Information

1. Please identify any disorder(s) or impairment(s) with which you have been diagnosed:

Blank lines for answer 1

2. Please identify any other condition(s) affecting school that you would like to discuss:

Blank lines for answer 2

3. Onset of disability/date of diagnosis:

4. Current Treating Specialist (s) and contact information:

Blank lines for answer 4

Functional Limitations: Please check any of the major life activities listed below that you believe are affected as a result of your diagnosed condition. Please indicate level of limitation you believe you experience as a result of the condition.

0 = Not applicable 1 = Unable to Determine 2 = Mild 3 = Substantial

0	1	2	3		0	1	2	3	
				Caring for Oneself					Working
				Talking					Interacting with Others
				Hearing					Sleeping
				Breathing					Learning
				Seeing					• Reading
				Walking/Standing					• Writing/Spelling
				Lifting/Carrying					• Calculating
				Sitting					• Memorizing
				Performing Manual Tasks					• Concentrating
				Eating					• Listening

I am requesting the following possible accommodations:

- Academic Accommodation(s) (e.g.; classroom, test-taking, alternative media, interpreters etc.)
- On-Campus Housing Accommodation(s) (e.g.; room modifications, AC, accessible bathrooms, etc.)
- Campus Accessibility (e.g.; doorways, elevators, lights, etc.)
- Service Animal

Please describe the services you are interested in requesting: _____

Please describe the services you are currently receiving or received in the past (e.g.; can be from high school Special Education or 504 plan, accommodations on the ACT/SAT/GRE tests, etc.): _____

I am interested in the following fee based service(s) or program(s). Eligibility for fee based services and programs are determined by CSD staff and documentation meeting UWW guidelines is required.

- CSD Project ASSIST*
- CSD Summer Transition Program
- Adaptive Transportation
- Rehabilitation Technology
- Out of Class Homework Aides
- Pre-Enrollment Assessment (for students with complex needs)

I will need a personal care attendant (PCA), circle one: Yes No Unsure

CSD does not hire or pay for personal attendants; however, we can refer you to resources in the community. This service may take extended time to arrange.

Comments or Is there anything else you would like us to know? (e.g.; Advising, Financial Aid, Housing, etc.):

Please Note: Submission of a CSD Accommodation Form does not imply you will receive services. To be eligible for disability related services, students must have a documented disabling condition as defined by the Americans with Disabilities Act of 1990 (ADA), ADA Amendments Act 2009 and Section 504 of the Rehabilitation Act of 1973.

Please refer to Eligibility and Documentation Requirements in the Center for Students with Disabilities page at [uww.edu /csd](http://uww.edu/csd) documentation guidelines.

Contact Information:
University of Wisconsin – Whitewater
Center for Students with Disabilities
800 W. Main St.
2002 Andersen Library
Whitewater, WI 53190-1790

Phone Voice/TTY or Relay:	(262) 472-4711
UWW Toll Free Phone:	(800) 628-4559
Fax:	(262) 472-4865