

Office of Student Disability Services

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Disability Verification Form

Purpose: The student named below is requesting accommodations from the office of Student Disability Services at Swarthmore College. Student Disability Services works with students with documented disabilities. Under the American with Disabilities Acts and the Rehabilitation Act of 1973, an individual with a disability means any person who:

- 1) Has a physical disability or mental impairment that substantially limits one or more major life activities;
- 2) Has a record of such impairment; or
- 3) Is regarded as having such an impairment

To ensure the provision of reasonable and appropriate services, students requesting services are required to provide documentation in adherence with the following guidelines:

- A qualified professional must conduct the evaluation. The name, title and professional credentials of the evaluator, including information about license or certification as well as the area of specialization, employment and state/province in which the individual practices should be clearly stated in the documentation. It is not considered appropriate for professionals to evaluate members of their own families.
- The documentation must include a clear diagnostic statement that describes how the condition was diagnosed, provides information on the functional impact, and details the typical progression or prognosis of the condition.
- The documentation must include a description of the diagnostic criteria, evaluation methods, procedures, tests and dates of administration, as well as a clinical narrative, observation, and

specific results. When appropriate to the nature of the disability, having both summary data and specific test scores within the report is required (ex. for learning disabilities).

- The documentation is age appropriate and based on a current evaluation.
- The diagnostic report should include specific recommendations for accommodations as well as an explanation as to why each accommodation is recommended. The evaluators should describe the impact the diagnosed disability has on a specific major life activity as well as the degree of significance of this impact on the individual. The evaluator should support recommendations with specific test results or clinical observations.
- Please note that the final determination of accommodations will be determined by Student Disability Services staff. Not all accommodations recommended may be considered reasonable.

Diagnostic Information from Provider

Please fill out the following form on behalf of your client and attach any relevant documentation.

Student N	Student Name:					
	rth:					
How long have you been treating this student?						
Date of La	st Contact with S	tudent:				
Diagnosis	l					
DSM-V D	iagnosis (if releva	unt):				
Date of Di	agnosis:					
What tools	or measures wer	e used to assess the stu	dent and complete a diagnosis			
	ach diagnostic rej					
Describe t	he symptoms asso	ociated with the condit	tion:			
Soverity of	f condition witho	ut accommodations:				
Mild	Moderate		Severe			

What are the student's current functional limitations in an educational setting due to their condition? Please select all that apply:

Ambulation	Motor Function	Hearing	Vision
Cognitive Process	Social	Emotional	Other:

What recommendations do you have regarding necessary and appropriate accommodations to provide equal access to the student's educational opportunities at Swarthmore College?

Anticipated duration of the condition? (One semester, two years, lifetime, etc.):

Current medications including dosage and side effects (if applicable to educational needs):

Any additional comments?

Qualified Professional's Name & Title:
Address:
Daytime Telephone Number:
License/Certification Number and State of Licenser:
Type of License:
Date of initial contact with student:
Date of last contact with student:

Signature_