Banacos Academic Center

Learning Disabilities Program

[ldp@westfield.ma.edu](mailto:ldp@westfield.ma.edu)

Banacos Advisor:



**Reasonable Accommodations Request**

Today’s Date:



**Request for:**

Entire Undergraduate degree, beginning with: semester (i.e. fall 2020, spring 2021). Selecting this option allows for this form to only be completed once and have the same accommodations go to all your professors each semester.



**\*\*Please note: this option is only for students part of the LDP program. Accommodations can be changed or adjusted and this decision can be revoked at any time. Just speak to your Banacos Advisor\*\***

**OR**

Full academic year: (i.e., 2020-2021)



**OR**

Semester: (i.e. fall 2020, spring 2021, etc.)



Name: UWID#:



Address:



Phone: (i.e. 555-555-5555) WSU Email: @westfield.ma.edu



Major 1: Major 2:



What academic accommodations are you requesting?

50% (time and a half) for exams

100% (double time) for exams

Reduced distraction environment for exams

Calculator for exams

Reader for exams

Scribe for exams

Alternate format for exams

Unlimited printing

E-text

Note taking assistance

Classroom (for example: classroom furniture or breaks during class):

What other accommodations are you requesting? \*\*Please type the text boxes to be specific in what you are requesting\*\*

Housing (i.e., single in suite; residential hall with elevator):



Parking:



Dining:



Other:



**Accommodation Notices**

**Send to all instructors:**

I would like all of my instructors to receive a notice of accommodations.

**OR**

**Send for only some courses:** (fill this out only if you did not check the option above)

I will choose the courses and instructor names to whom you should send a notice of accommodation.

|  |  |
| --- | --- |
| Course &  Section Number  (i.e., ENGL 0102-001) | Instructor |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

\*If your schedule changes after you have submitted your request, be sure to inform your Banacos advisor.\*

Which offices would you like notified and what should we tell them? \*\*Please type in the text boxes to be specific in what you want us to notify them about.\*\*

Residence Life



Facilities



Parking Clerk



Dining



Registrar



Other:



Is there any other information you would like us to share with other offices or instructors?

No

Yes. What information and to whom?

**Signature:**  **Date:**



\*\*To submit this form, please save it on your computer and email it to your Banacos Advisor via your WSU email address.\*\*

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**To revoke request for the same accommodations for entire undergraduate degree:**

I want to revoke the decision to have the same accommodation request for my entire undergraduate degree.

I understand that by revoking this, I will have to complete a new request form each year (or each semester) in order to have my accommodations sent out.

**Signature:**  **Date:**



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\*Office Use Only\*

Notes: