

Disability Documentation Form

Student Name: _____ Student DOB: _____

Documentation should be provided by a licensed health care professional whose scope of practice permits the diagnosis of a qualifying disability and whose professional relationship with the student is sufficiently recent to reflect current impairment. The health care professional should be an independent evaluator, with no personal relationship to the student. The health care professional may include pertinent records that help convey the impact of the disability on the student in the university setting. The health care professional may provide the following information by completing this form or by preparing a letter that conveys equivalent information.

So that we may better evaluate the student's request for accommodations, please answer the following questions:

1. Health Care Professional Information

- a. Describe the nature of the professional relationship with the student (e.g., treating physician, psychologist, clinical counselor, independent expert evaluator, etc.).
- b. List the date of the most recent examination.
- c. When did you first meet with the student regarding their condition or diagnosis?

2. Explain the student's physical or mental impairment(s) that substantially limits at least one major life activity or major bodily function (condition, diagnosis, etc.).

- a. What is the condition or diagnosis?
- b. What sources or instruments were used to evaluate and obtain information to verify the condition or diagnosis?

- c. When was the date of onset of the condition or date of diagnosis?
- d. What is the severity of the condition (mild, moderate, severe)?
- e. What is the prognosis or progression of the condition? Is the condition stable or episodic in nature? Explain.
- f. Is the student currently prescribed medication or receiving treatment for this condition? If yes, please list the medications/treatments and indicate possible side effects (if relevant).
- g. Explain how the student is substantially limited in one or more major life activity by their condition.

3. Explain the impact of the student's disability in the university setting.

- a. What is the functional impact of the condition in the university setting?

