



6. What accommodations are you requesting?

- Exam accommodations
- Assistive Technology
- Notetaking Support
- Other
- Sign Language Interpreter/CART
- Assistive Listening Device
- Alternate format of text books

Is there anything else that you would like Disability Support Services to know about you?

Optional: Are you seeking support for any of the following areas?

- Navigating Financial Aid
- Connecting with other students
- Mental Health Support
- TRIO
- Study Skills
- Career Planning
- Mobility and Orientation
- Other:

To support your request for accommodations, please submit documentation, in addition to this application, which includes a diagnosis of the condition(s) indicated above and the extent to which the condition(s) currently limit(s) major life activities such as performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, sitting, reaching, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, interacting with others, and working.

Please submit this form to the Disability Support Office in the Learning Resource Center,  
or email a copy to [DisabilitySupport@fvcc.edu](mailto:DisabilitySupport@fvcc.edu).