

Touro Law Center
Request for Student Disabilities Services

1. To initiate the request process, please complete both sides of this form, and submit it to the Office of Student Services.
2. Please provide a copy of all appropriate disability documentation (including tests and test scores).
3. Please be aware that your request cannot be considered until the Law Center has received your completed form and all of the supporting documentation. You are urged to submit all of the completed forms and documents as soon as possible, as the review process can extend over a minimum of thirty days.
4. Please be aware that Touro Law Center may review your request with our independent evaluator before granting or extending a request for a reasonable accommodation. In addition, the Law Center will deny any request if the accommodation sought is not supported by the data in the assessment or documentation.

Name _____

Date _____

Touro ID #: _____

Check one: Full-Time Student Part-Time Day Student Part-Time Evening Student

1st year 2nd Year 3rd year 4th Year Visitor

Telephone Number () _____ Cell() _____

A1. Disability Documentation: _____ (number of pages attached)

A2. Nature of Disability:

A3. Accommodation(s) requested: (Please describe specifically the accommodation(s) you are requesting and your reasons for the request. Also describe alternative suitable accommodations. You may attach additional pages if necessary.)

A4. Authorization and Release: By signing this form, I authorize the Assistant Dean for Student Services to speak with Touro Law Center's independent evaluator, and to speak with and seek additional documentation from the following individuals concerning my disability and my requested accommodation: *(Please write name(s) of professional(s) from your documentation.)*

Student Signature

Date