

**Office of Disability Services (ODS)**  
**Smith College School for Social Work**  
**Accommodations and Services Request Form**

- Please complete ALL SECTIONS of this form.
- A new form must be submitted for course accommodations each summer.
- Please remember to also complete the Field Accommodations section of this form to request academic and placement related accommodations.
- Medical and/or educational information about your disability must be provided to ODS.
- Requests for new or changed accommodations will be reviewed before approval. You will be notified if additional documentation is needed.
- Retroactive accommodations cannot be provided.
- If your address (permanent or on-campus) changes, please notify ODS immediately.

<b>Student Information</b>			
<b>Accommodation request for:</b>		<b>Today's Date</b>	
<b>Field</b>	<b>Summer</b>		
<b>Name (include the pronoun you use)</b>		<b>House:</b>	<b>Home Address:</b>
		<b>Room #:</b>	
<b>Phone</b>		<b>E-mail:</b>	
<b>Are you living off-campus this summer?</b> Yes    No	<b>Academic Advisor:</b>	<b>Faculty Field Advisor:</b>	<b>Student ID:</b>
<b>Address:</b>			

<b>Disability:</b>
<b>Please explain your disability and/or the challenges you are experiencing:</b>
<b>Documentation provided to the Office of Disability Services? Yes    No</b>
<b>Date:</b>

<b>Semester Course Schedule - Term 1</b>		
<b>Course Number/section</b>	<b>Instructor</b>	<b>Instructor's email</b>
1.		
2.		
3.		
4.		
5.		

<b>Semester Course Schedule - Term 2</b>		
<b>Course Number/section</b>	<b>Instructor</b>	<b>Instructor's email</b>
1.		
2.		
3.		
4.		
5.		

<p><b>Do you need Housing Accommodations? Yes      No</b></p> <p>Please explain:</p>
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**Service Animals and Emotional Support Animals**

\_\_\_ I am bringing a trained service animal (dog) with me to campus.

\_\_\_ I would like assistance communicating with my faculty about the presence of my service animal (dog) in classes.

\_\_\_ I am requesting permission to have an emotional support animal live with me in the residence hall.      Type of animal requested:

**Note: Please complete all necessary animals in housing contract forms on the ODS website.**

**Academic Accommodations/support for summer courses (check all that apply)**

	<b>Type of Accommodation</b>	<b>Please explain:</b>
	Sign Language Interpreter/FM System or other listening device	
	Communication Assistance	
	Assistive Technology	
	Special Furnishings in classrooms	
	Captioning	
	Books/materials in alternative format	
	Classroom Note taker	
	Extensions for written assignments or projects	
	Excused Absences	
	Assistance with Organization and planning/learning skills	
	Other (please specify)	
	Other (please specify)	

<b>Dietary Accommodations Needed:</b>		
	<b>Dietary concern</b>	
	Food Allergies/sensitivities Please list all allergies:	
	Have you been in touch with Dining services? Yes No	Do you have a diet that is prescribed by a physician or nutritionist? Yes No Please attach a copy of the diet or provide a doctor's letter.
	Other food challenges:	

**Services or Information Needed (check all that apply):**

	<b>Topic</b>		<b>Topic</b>
	Help finding physician, therapist or psychiatrist		Internships and job resources
	JYA or travel abroad questions		Finding help, personal care assistant, or house cleaning
	Wheelchair repair service		Financial aid/ Work study
	Help finding learning or writing coach.		Support group
	Need information about community resources		Off campus transportation
	Questions about LD/ADHD testing		Other: (please specify)
	Assistive technology for personal use		

**Do you need support with writing or learning strategies?      Yes      No**  
**Please explain:**

**Additional Comments:**

## Field Placement Accommodations (check all that apply)

I will need job related accommodations during my field placement:    Yes    No

<b>Placement Agency Name, address, and Phone:</b>	<b>Name/title of supervisor:</b>
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	Type of Accommodation	Please explain
	Sign Language Interpreter/FM System or other listening device	
	Other Communication Assistance (please specify)	
	Special Furnishings in the workplace	
	Captioning	
	Assistive Technology	
	Books/articles in alternative format (please specify)	
	Flexible scheduling	
	Instruction/Supervision	
	Extensions on written work	
	Location	
	Transportation	
	Other	
	Other	

I will need accommodations for written academic assignments and projects during my year in field.

Please list each assignment and accommodation requested:

ODS notes:

**PLEASE SIGN (Your request will not be processed without a signature)**

I authorize the Office of Disability Services to obtain information from and communicate with my providers about my disability.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I have also completed a release form allowing ODS and the School for Social Work to communicate regarding accommodations and supports I will need during the program. This may include faculty, Deans, and professional staff at Smith College when necessary to determine, clarify and implement my need for specific disability-related accommodations.

Signature \_\_\_\_\_ Date \_\_\_\_\_