

SDC ACCOMMODATION REQUEST FORM

Name: _____ Student ID#: _____	
Local Address: _____	Local Phone: _____
City, State, Zip: _____	E-mail: _____
Is this a new address and/or phone number? Yes <input type="checkbox"/> No <input type="checkbox"/>	
I acknowledge that by requesting academic accommodations, I am authorizing the SDC Disability Specialist to discuss information relevant to the recommended accommodations with faculty and staff who have a need to know. I understand that, as with all University activities, I am required to comply with the UC Davis Student Code of Conduct, including the responsibility to accurately represent my circumstances.	
Student's Signature: _____ Date: _____	

Check One: Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Sum I <input type="checkbox"/> Sum II <input type="checkbox"/> YEAR _____
Disability Specialist: _____

1. Course Abbrev. & No. _____ Units _____ Instructor _____ Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

2. Course Abbrev. & No. _____ Units _____ Instructor _____ Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

3. Course Abbrev. & No. _____ Units _____ Instructor _____ Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

Received By: _____ Date: _____ Routed To: _____
Approved _____

Revised 5/04

Deleted: Appointment

Deleted: Page Break

4. Course Abbrev. & No. _____ **Units** _____ **Instructor** _____

Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

5. Course Abbrev. & No. _____ **Units** _____ **Instructor** _____

Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

6. Course Abbrev. & No. _____ **Units** _____ **Instructor** _____

Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

7. Course Abbrev. & No. _____ **Units** _____ **Instructor** _____

Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.

8. Course Abbrev. & No. _____ **Units** _____ **Instructor** _____

Please describe the format of the course, including test format, and the accommodation(s) you are requesting. Be specific.