



Disability Services Request Form

Denver Seminary strives to provide students who have documented disabilities with equal opportunities to succeed in accordance with applicable law and the Seminary's resources, mission, and principles.

The Law

Section 504 of the Rehabilitation Act states that "no qualified handicapped person shall, on the basis of handicap, be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity which receives Federal financial assistance" (34 C.F.R. Part 104.4). By law, Denver Seminary must provide reasonable accommodations at no cost to any student who has a documented disability/medical condition as required by the Americans with Disabilities Act (ADA), ADA Amendments Act of 2008 (ADAAA), and Section 504 of the Rehabilitation Act of 1973. In order to maintain the integrity of Denver Seminary's education, these adjustments cannot include changes to curriculum or subject material.

The Seminary is not required to provide personal assistants, individual personal tutors, coaches or personal assistive technology. Whenever possible, we will refer students to agencies that may provide personal assistance of that nature.

The Seminary is not required to make, and does not make, accommodations that would reduce academic expectations or standards or eliminate essential components of any course. Open-book tests or exams are not provided as an accommodation but may be a part of any particular instructor's methodology for instruction and testing.

What is a "documented disability"?

A "person with a disability" includes anyone who (i) has a physical or mental impairment which substantially limits one or more of such person's major life activities, (ii) has a record of such an impairment, or (iii) is regarded as having such an impairment. Section 504 protects the civil rights of individuals who are qualified to participate and who have disabilities such as, but not limited to, the following:

- Blindness or visual impairments
- Chronic illnesses, such as: cancer, multiple sclerosis, muscular dystrophy, etc.
- Cerebral palsy
- Deafness or hearing impairments
- Epilepsy or seizure disorders
- Specific learning disability
- Mental illnesses, such as depression, anxiety, Post-Traumatic Stress Disorder, etc.

Students requesting accommodations must be "otherwise qualified" to fulfill the expectations associated with their program of study. A student is considered "otherwise qualified" if all he/she needs to qualify is a "reasonable accommodation."

Request for Accommodations under Section 504 of the Rehabilitation Act of 1973

How is an accommodation request submitted?

Students who have an ADA recognized disability and desire special arrangements to participate in Seminary classes and programs, utilize Seminary equipment and learning resources, and/or have access to Seminary facilities, must submit a request to the Student Care Office.

What documentation is required?

Disability documentation must include a written evaluation from a physician, psychologist, or other qualified specialist that establishes the nature and extent of the disability and includes the basis for the diagnosis along with dates of testing. Further, the documentation must establish the current need for an accommodation and contain suggestions for offsetting the effects of the disability. When possible, documentation must be current, but we recognize that the nature of a disability can affect whether or not current documentation is available. If you do not have current documentation, a reasonable accommodation can be granted with the understanding that you will provide the Student Care Office with documentation by an agreed upon date.

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This section is to be completed by the STUDENT (please print):

_____, _____, _____
Last Name First Name Middle Initial

Male: Female: DOB: ____/____/____ Student ID# (if known): _____

Address 1

Address 2

_____, _____, _____
City State Zip

Cell Phone: (____) _____ - _____ Home Phone (____) _____ - _____

Preferred Email: _____

Please list below all diagnosed conditions for which you are seeking accommodations:

1. _____
2. _____
3. _____

Does your disability require the service of an animal: No Yes

Of the groups listed below, please indicate if there are any with whom you would like the Dean of Students to share information about your medical situation (you are not required to check any):

- Medical Response Team
- Security/Emergency Response Team
- Housing Office
- Human Resources (for matters related to student employment)

* By default, the Student Care Specialist will never share student medical information without prior consent from the student. Otherwise, your information will remain private and only be shared in emergency situations.

Physician Information:

Physician/Therapist Name

Specialty/Type of Doctor

_____, _____, _____, _____
Office Address City State Zip

(____) _____ - _____

Telephone #

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INFORMATION REQUIRED FROM YOUR DOCTOR:

The information below must be provided by the student's physician, psychologist/therapist, or otherwise qualified specialist on their official letterhead with signature, credentials, and date. When completed, this information should be submitted to the Student Care Specialist at Denver Seminary, and can be sent via fax (303-783-3122), scanned and emailed to studentcare@denverseminary.edu, or given to the student for submission in person.

1. Documentation referencing the diagnosis:

Please provide medical documentation verifying the diagnosis in question, including test results if applicable. Please note that new testing may be required. If the student already has valid documentation, obtaining new documentation from the physician is not needed.

*If you are not the diagnosing physician, please provide what information you do have regarding the student's disability (e.g. history, treatment, current status, etc.).

2. Description of how the disability affects the student's capacity to fulfill expectations associated with their academic program, including needs associated with on-campus housing and employment, and/or building access.

3. Please list the accommodation(s) that you recommend or that are being requested by the student.