



Accommodations Registration

Colorado Christian University strives to ensure that qualified students with disabilities are accommodated and if possible that these accommodations do not jeopardize successful therapeutic interventions. The office does not modify requirements that are essential to the program of instruction or provide accommodations for persons whose impairments do not substantially limit one or more major life functions.

This form should be completed by the student requesting accommodations.

Student Name: _____ Student ID: _____ Date of Application: _____

If currently living on campus: Building: _____ Apartment #: _____ Email: _____

CCU Box # or off campus Address: _____ Phone: (____) _____

Description of Disability

Please tell us what your diagnosed disability is and list the functional limitations. Indicate how the disability limits your access or ability to fully participate in an academic and/or on campus living environment.

Disability Category

Check all that apply:

Disability is: Permanent/Chronic Continuously Changing Short Term - Estimated Time: _____

Physical Impairment: Visual Hearing Orthopedic Neurological Respiratory Other _____

Mental Impairment: Acquired brain injury Specific learning disability Psychosocial disorder

Academic Accommodations

Place a check by the academic accommodations that you are requesting. Please note that the accommodations listed below are not necessarily available to every student who requests services. The final determination of academic accommodations is subject to verification of disability and documented need based upon areas of deficiency.

- Separate location for exams Extended time on exams Voice to text technology
- Reader technology for exams Adaptive technology Use of Word Processor Interpreter Preferred seating
- Note-taker Conversion of text materials to audio or Braille format Early registration
- Letter(s) to or individual conference with faculty explaining the nature of your disability
- Other, please describe: _____



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On Campus Housing Accommodations

Place a check by the on campus accommodations that you are requesting. Requested on campus housing accommodations will be reviewed by the Director of Residence Life and are granted based upon a student's functional limitations, level of need, and current housing availability; additional fees may be incurred for certain accommodations, as they apply to all on campus students. The final determination of all accommodations is subject to verification of disability and documented need based upon areas of deficiency.

- Apartment/bedroom on a specific floor; please indicate desired floor: First Second Third
- Wheelchair accessible Single bedroom (additional fees apply) Single apartment (additional fees apply)
- Air Conditioning: Year Round Seasonal Centrally located Service Animal in Residence Hall
- Waiver from Residency Requirement for first- and second-year students
- Other physical accommodations not listed above, please describe: _____

Chapel Accommodations: There is not an accommodation to decrease or eliminate chapel requirements. If a chapel accommodation is approved, the student will meet with the Dean of Spiritual Formation to determine specifics of the accommodation.

Checklist

Please make sure the following are turned in and/or completed along with your registration form.

- Documentation of disability (tests, assessments, etc.) and/or Verification Form
- Release of Information Form
- Upon arrival on campus, please complete an accommodations interview at the Life Direction Center

Please submit the Accommodations Registration and documentation as soon as possible. Reviewing and granting of accommodations can take up to eight weeks. Some accommodations may not be implemented until the next semester if your application is not submitted eight weeks prior to the semester starting.

The following signature states that I have read and agree to the accommodation process, grievance policies (available in the Academic Catalog and Student Handbook), and timeline. I also certify that the documentation and/or verification form has been signed by a licensed/certified professional and that all contents are accurate.

Student Signature

Date