



Office for Student Access
Academic & Student Affairs

Office for Student Access

Student Handbook

2004-2005

Office for Student Access (OSA) Student Handbook

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Welcome to the Office for Student Access

University Mission

OHSU's fundamental purpose is to improve the well-being of people in Oregon and beyond. As part of its multifaceted public mission, OHSU strives for excellence in education, research, clinical practice, scholarship and community service. There are many shared values which support this mission including the value of Diversity. Welcoming diversity and celebrating the contributions of individuals from all walks of life.

Office for Student Access Mission

The mission of the Office for Student Access is to help support the University's mission and value of diversity within OHSU by facilitating and supporting equal access to its programs and services for students who experience a disability. The Office for Student Access strives to provide and promote a supportive, universally accessible, non-discriminatory learning and working environment for students including those students who experience a disability.

Eligibility

To be eligible for disability-related services, individuals must have a documented disability as defined by section 504 of the Rehabilitation Act and/or the Americans With Disabilities Act (ADA), of 1990. Eligible disabilities include physical and mental impairments which may include but are not limited to vision, hearing, mobility, learning, systemic, psychiatric, and brain injury that substantially limit one or more major life activity. The Office for Student Access will request documentation from an appropriate professional to certify individuals as having a disability. The cost of

obtaining documentation will be borne by the individual (student). If the initial documentation is incomplete or inadequate to determine the extent of the disability and appropriate accommodations, the Office for Student Access has the discretion to require supplemental assessment of a disability. The cost of the supplemental assessment shall also be borne by the individual. If the University determines a second professional opinion is warranted then the University shall bear that cost.

Pending receipt of the eligibility documentation, the Office for Student Access and/or the University reserves the right to deny services and accommodations.

Determination and Provision of Accommodations

As per section 504 of the Rehabilitation Act and the ADA academic adjustments, auxiliary aids and program modifications will be provided to qualified students with a disability to enable that student to have an equal opportunity to participate in any program, course, activity, or service offered by the University. An equal opportunity means an opportunity to attain the same level of performance or to enjoy equal benefits and privileges as are available to similarly-situated individuals without a disability.

The University is obligated to provide academic adjustments, auxiliary aids and/or program modifications (accommodations) only to the known limitations of an otherwise qualified individual (student) with a disability. In general, it is the responsibility of the student with a disability to inform the University that an accommodation is needed. When a qualified student with a disability requests an accommodations, the University will make a reasonable effort to provide an accommodation, adjustment, and/or auxiliary aids that is effective for the student. Students will be provided with a written response regarding eligibility for services and recommended accommodations (if any) once appropriate documentation has been received.

Admissions decisions, evaluation of performance, course examinations and other measures of achievement, will be conducted with appropriate accommodations or modifications to ensure that the decision and evaluation reflects the students merit and achievement rather than reflecting the impact of a disability.

Program Accommodation Liaisons (PALs)

The Office for Student Access acts as the primary repository for students with disabilities files and is responsible for making recommendations for appropriate accommodations for students with disabilities. The Program Accommodation Liaison (PAL) acts as an “in-house” resource for students and faculty concerning access issues for students with disabilities. The PAL works in collaboration with the Office for Student Access to implement recommended accommodations for students with disabilities. The Office for Student Access will provide PALs with information and guidelines for working with students with disabilities. PALs are appointed by the Dean of the school or another designated person with the authority to assign PAL duties.

Requesting Services

Making Requests in a Timely Manner:

Advanced planning is needed to ensure the timely provision of appropriate accommodations. A qualified student with a disability may not be excluded from a program due to lack of appropriate services. However, all services may not be on hand at all times. Therefore, it is important to allow sufficient time for a program and/or the institution to put accommodations and appropriate auxiliary aid(s) into place. Therefore, students must turn in their requests for accommodations within an the appropriate time frame, usually 6 weeks prior to the beginning of the next term for which the accommodations are being requested. If a request is submitted after the relevant deadline, the Office for Students Access OSA will make every reasonable effort to accommodate the request but cannot guarantee that an untimely request can be met. Untimely requests may result in delay, substitutions, or denial of accommodation.

How to Request Services:

Students requesting academic support services (accommodations) are required to submit ~~a copy of their schedule with~~ a written request of the specific accommodations being requested along with related relevant information (a copy of your class schedule, clerkship rotation schedule, clerkship sites, etc.) each term.

Implementing Recommended Accommodations:

A letter identifying the recommended accommodations will be sent to the student and the appropriate Program Accommodation Liaison (PAL) each term. The PAL will facilitate the implementation of the accommodations with the faculty of record for the student.

Rights and Responsibilities of Students with Disabilities Regarding Access to Oregon Health & Science University

Rights:

- to an equal opportunity to participate in and benefit from, courses, programs, services, and activities offered through the University;
- to an equal opportunity to work and to learn, and to receive accommodations, academic adjustments, and/or auxiliary aids and services;
- to appropriate confidentiality of all information regarding their disability and to choose to whom, outside the University, information about their disability will be disclosed, except as disclosures are required/permitted by law;
- to information, reasonably available in accessible formats.

Responsibilities:

- to meet qualifications and maintain essential institutional standards for courses, services, and activities;
- to self-identify as an individual with a disability, and to follow institutional guidelines to request accommodations and services;

- to demonstrate and/or document (from an appropriate professional) how the disability limits their participation in courses, programs, services, or activities;
- to follow published procedures for obtaining information, services and accommodations.

Rights and Responsibilities of the Office for Student Access Regarding Disability Access

Rights:

- to request and receive, through the Office of Student Access, current documentation that supports requests for accommodations, academic adjustments, and/or auxiliary services;
- to deny a request for accommodations, academic adjustments, and/or auxiliary services if the documentation demonstrates that they are not warranted, or if the individual fails to provide appropriate documentation;
- to select among equally effective accommodations, adjustments, and/or auxiliary services;
- to refuse an unreasonable accommodation, adjustment, and/or auxiliary service or one that imposes an undue hardship or fundamental alteration on a program or activity of the University.

Responsibilities:

- to provide information to students with disabilities in accessible formats upon request;
- to ensure that courses, programs, services, and activities when viewed in their entirety, are available and usable in the most integrated and appropriate settings;
- to provide or arrange, accommodations, academic adjustments, and/or auxiliary services for students with disabilities in courses, programs, services, facilities, and activities;

- to maintain appropriate confidentiality of records and communication, per the Confidentiality Statement, except where permitted/required by law.

Confidentiality Statement

The Office for Student Access (OSA) is committed to ensuring that all information regarding a student's disability is kept in accordance with state and federal laws.

Students requesting accommodations from OHSU (any school or program) will be requested to sign a Registration Agreement ~~may sign a statement~~ acknowledging that they understand that provision of disability services and accommodations may involve sharing/disclosure of disability information provided by the student with appropriate University personnel participating in the accommodation process. It is important for students to understand what their signature means. The following is an explanation of our procedure and practice pertaining to confidentiality and disclosure.

University Obligation:

- The University has an obligation to confirm that students receiving accommodations have verified disabilities according to state and federal law. We request disability documentation and develop accommodation and service recommendations based on this information. Accommodations and services may not be provided if the student does not provide documentation of a disability, does not have a diagnosed disability or does not follow OSA and University policies and procedures. Disability documentation is housed in a confidential student file and does not become a part of the students' academic permanent educational record.

Confidentiality and Privacy:

- Students have a right to confidentiality. The University recognizes that student records for the purpose of disability documentation, disability determination and accommodation determination are confidential, as per state and federal laws, and are treated as such. However, the students' right to privacy must still be balanced against the University's need to

know the information in order to provide requested and recommended services and accommodations.

- When students request accommodations, particularly instructional accommodations, the issue arises as to what and how much information the faculty needs and/or has the right to receive. By signing the [Registration Agreement disclosure form](#), students acknowledge an understanding that, in order for the OSA staff to coordinate, advise or administer requested accommodations, disclosure of disability information to faculty or appropriate administrator/staff may be necessary, and/or required.

Disclosure:

- First, it is important to understand that no one except the OSA staff has automatic access to the student files housed in its office. The OSA staff works very closely with a designated Program Accommodation Liaison (PAL) in each of the primary schools (SOM, SON, SOD, and SOSE ~~OGI~~). The PAL works closely with OSA to make sure accommodations are implemented effectively for the students in their schools. As a result a PAL is considered part of the team and therefore more information might be disclosed to the PAL than to other faculty and staff.
- What do we mean by “disclosure”? Disclosure exists on a continuum ranging from minimum to full disclosure of disability documentation. An example of minimum disclosure would be the case of a faculty member requesting only confirmation that an OHSU/~~OGI~~ student has a disability and that the accommodations were indeed recommended based on the documentation in the OSA student file. Thus, we have disclosed the presence of a disability and the recommended accommodations. It is important for a student to understand that whenever we acknowledge that he/she has a disability, we have essentially “disclosed” confidential information. Because we talk with faculty and staff in order to implement accommodations, we routinely confirm that the student has a verified disability. Some schools operate programs at other [\(host\)](#) institutions. In this example, the OSA would work with a designated faculty member or administrator for that program on campus. Minimum disclosure might be required or more information as indicated in the next paragraph below. Additionally, the host campus disability services office might also need to assist with implementation of accommodations, making some

disclosure of information necessary. As this person/office is not an OHSU employee a release form would need to be signed to share information either verbal or written.

- Moving along the continuum, discussing with this same professor the specific nature of the disability (e.g., learning disability, low vision, epilepsy, etc.) and the rationale for the accommodation requested constitutes more comprehensive disclosure. In this case, the specific disability and its impact on a specific student is disclosed with the intent of assisting the faculty member in understanding the relationship between the disability and the accommodation. Often, the additional information assists faculty in designing an appropriate accommodation.
- Finally, full disclosure would be sharing, either verbally or in writing, specific and detailed information regarding a student's disability. For example, providing a copy of a psycho-educational report or hospital or other medical records would constitute full disclosure of disability documentation. OSA does not provide full disclosure of disability documentation to faculty. Providing copies of file information requires a student to sign a separate release of information form.

Signing the Registration Agreement a Disclosure form:

- The purpose of signing the Registration Agreement form Confidentiality Statement and Disclosure Form is to maintain a record that the student understands our procedure and protocol on disclosure of disability.
- What if a student does not sign the Registration Agreement disclosure form? Signing the Registration Agreement disclosure form acknowledges that the student understands our disclosure procedure, it is not a request for permission. Students requesting that the OSA, not disclose disability, at any level, must submit in writing their request specifically describing what level, if any, of disclosure they are authorizing. Students are not required to sign the Registration Agreement disclosure form. If a student asks that we do not discuss their situation with faculty or staff, their request will be honored. However, students need to understand that if they are requesting OSA to provide accommodations, and if they prohibit the individuals responsible for implementing accommodations from discussing critical components of the situation (such as the relationship of the disability to

the course and the requested accommodations), then it may not be possible to implement an accommodation.

Summary:

- The University has an obligation to confirm disability status and the right for appropriate staff to discuss students and their disabilities.
- Students have a right to privacy with minimal disclosure of confidential information.
- Students sign the Registration Agreement disclosure form acknowledging that some level of disclosure may be necessary to selected faculty, administrators and staff in order to implement requested accommodations.
- Disability documentation is not shared directly with faculty; however, Program Accommodation Liaisons (PALs) may, on occasions, deemed necessary, have access to such records.
- If students do not want OSA to disclose disability information to anyone under any circumstances they may opt not to sign the Registration Agreement disclosure form; however, students need to be aware that implementing accommodations may become unattainable as a result.

Definition of Terms:

Disability Documentation:

All records related to health, intellectual, emotional or physical well being of an individual prepared by a health care provider, including but not limited to physicians, nurses, therapists, psychologists, social workers, and counselors.

Academic Permanent Educational Record:

Official university record maintained by the registrar containing the students' application, transcripts, and grade lists.

Program Accommodation Liaison (PAL):

~~Program Accommodation Liaison.~~ The PAL is the designated person in an OHSU school who is responsible for working directly with the OSA to make sure that students with disabilities needs are addressed in that school. The PAL acts as a resource and works directly with faculty and staff in helping to implement accommodation plans.

Disability Documentation Requirements

In order to provide reasonable and appropriate academic accommodations to those students at the University who have disabilities, the Office for Student Access (OSA) requires documentation which shows the current disability and its impact on academic functioning. Therefore, the documentation the student provides to the OSA must include the following information:

- ❖ **Documentation must be current.** The determination of what is current documentation depends on the nature of the disability. **However, in most cases documentation should be within the last three years.** OSA reserves the right to make appropriate modifications to this time frame.
- ❖ **The name, title, and professional credentials of the evaluator** including information about license or certification, as well as, area of specialization, employment, and state in which the individual practices. Professionals conducting the evaluation/assessment must be qualified to do so, and it is essential that they have experience working with adolescent/adult populations.
- ❖ **Reports must be on letterhead, typed, dated, and have the original signature of the evaluator.** Reports must be written in English or translated into English by a qualified translator.
- ❖ Reports need to **include the names of any standardized tests administered, the scores derived from these tests and a discussion of the data** that clearly indicates the presence of a disability. OSA reserves the right to determine which tests are acceptable for diagnosing the disability. Standardized tests must be based on adult norms.

- ❖ **The report must clearly state the specific diagnosis of the disability.** Terms such as “suggest” or “is indicative of” are not acceptable.
- ❖ The evaluator must **describe the impact of the diagnosed disability** on a specific major life function/activity (**especially as it relates to academic performance**).
- ❖ The diagnostic report should **include specific recommendations for reasonable academic accommodations and a detailed explanation of the rationale** for each recommended accommodation as related to the specific functional limitations.
- ❖ If **medications** are taken, these should be listed as well as their potential side effects.
- ❖ If symptoms involve **cognitive recall (memory), appropriate testing needs to be conducted.** Testing for specific learning disabilities may be appropriate.
- ❖ A doctor’s prescription pad note or a school plan such as an Individualized Educational Plan (IEP) or 504 Plan is **not sufficient** documentation in and of itself but can be included as part of a more comprehensive evaluative report.

It must be understood that evaluation reports themselves do not automatically qualify a student for registration or services with OSA. All of the items listed above must clearly show the presence of a disabling condition and clearly justify the need for reasonable accommodations. OSA will make the final decision as to whether reasonable and appropriate accommodations are needed and can be provided to the student.

Additional Documentation Requirements for:

Deaf and Hard-of-Hearing

Report from an audiologist or otolaryngologist that includes the following:

- Results of an audiogram showing the degree of hearing loss

- The type of hearing loss (conductive or sensorineural)
- Whether the hearing loss is temporary or permanent, and if it is stable or progressive
- Whether the condition is mitigated by hearing aids or medication
- A description of the functional limitation(s) caused by the disability
- Recommendations for reasonable academic accommodations

Physical Disability and/or Health-Related Impairment

Letter or report from a physician in an appropriate medical specialization that includes the following:

- The specific medical condition which causes the disability
- How long this condition has lasted and how long the physician has treated the student for the condition
- Whether the condition is temporary or permanent, and if it is stable or progressive
- Information about current prescribed medications used to treat the disability and possible side effects
- A description of the functional limitation(s) caused by the disability, including effects, symptoms and restrictions as a result of the disability
- Recommendations for reasonable academic accommodations

Speech Impairment

Report or letter from a speech pathologist or physician that includes the following:

- The specific disabling condition
- Whether the condition is temporary or permanent, and if it is stable or progressive
- A description of the functional limitation(s) caused by the disability
- Recommendations for reasonable academic accommodations

Visual Impairment

Report or letter from an ophthalmologist or optometrist that includes the following:

- The specific medical condition which causes the visual impairment and how long the student has experienced the condition
- The degree of visual acuity, including with corrective lenses
- The extent of the visual fields

- Whether the condition is temporary or permanent, and if it is stable or progressive
- Whether the condition is mitigated by corrective lenses or medication
- A description of the functional limitation(s) caused by the disability
- Recommendations for reasonable academic accommodations including any visual aids

ADHD/ADD

Report from a psychologist or psychiatrist that includes the following:

- Clear statement of ADHD with the DSM-IV diagnosis
- A description of the symptoms which meet the criteria for the diagnosis
- A summary of the assessment procedures and evaluation instruments which were used to make the diagnosis
- Information about current prescribed medications used to treat the disability and possible side effects
- A description of the functional limitation(s) caused by the disability supported by the assessment information provided
- Recommendations for reasonable academic accommodations

Specific Learning Disabilities

A comprehensive psycho-educational assessment from a psychologist or learning disabilities specialist that includes the following: **NOTE:** All of these tests must be based on adult norms.

- Clear statement of the specific learning disability with the DSM-IV diagnosis
- A test used to measure intellectual ability, including scores and subtest scores

Acceptable IQ tests:

Kaufman Adolescent and Adult Intelligence Test
 Stanford Binet 4th Edition
 Wechsler Adult Intelligence Scale – III (WAIS-III)
 Woodcock-Johnson III General Intellectual Ability (GIA)

Not acceptable:

Kaufman Brief Intelligence Test (KBIT)
 Slosson Intelligence Test
 Wechsler Abbreviated Scale of Intelligence (WASI)
 Wechsler Intelligence Scale for Children – III (WISC-III)

- A test used to measure academic achievement, including scores and subtest scores

Acceptable achievement tests:

Nelson-Denny Reading Test
 Scholastic Abilities Test for Adults (SATA)
 Wechsler Individual Achievement Test – II (WIAT-II)
 Woodcock-Johnson III Tests of Achievement
 Woodcock Reading Mastery Tests – Revised

Not acceptable:

Wide Range Achievement Test – 3 (WRAT-3)

- A test used to measure processing ability, including scores and subtest scores

Acceptable processing tests:

Detroit Tests of Learning Aptitude - Adult
 Woodcock-Johnson III Tests of Cognitive Abilities

- Profile of academic strengths and weaknesses and how these relate to the academic limitation(s)
- Clinical summary
- Recommendations for reasonable academic accommodations

Psychological and Psychiatric Disability

Psychological or neuropsychological evaluation or report from a psychiatrist or licensed psychologist that includes the following:

- Clear statement of the condition with the DSM-IV diagnosis
- A description of the symptoms which meet the criteria for the diagnosis
- A summary of the assessment procedures and evaluation instruments which were used to make the diagnosis
- Information about current prescribed medications used to treat the disability and possible side effects
- A description of the functional limitation(s) caused by the disability
- Recommendations for reasonable academic accommodations

Accommodations: It's Not Working Process Notification of a Complaint Procedure

Clear communication between students and their service providers and the OSA staff is vital to utilizing the OSA program effectively. Occasionally, there are problems and when these occur we want to engage in some problem solving with students to resolve the problems. Students who are having difficulties with their service providers, faculty or who want to address issues regarding access and/or accommodations should complete the "It's Not Working, I Need Help Notification of a Complaint" form.

Students on the OHSU Portland campus are responsible for notifying the OSA director of any problems/complaints. Students on other campuses are responsible for notifying the Program Accommodation Liaison (PAL) of any problems/complaints. To the extent possible, problems/complaints will be acted upon within 48 hours. Resolution of a problem/complaint is dependent on the nature of the problem/complaint. At any time students may contact the Affirmative Action Equal opportunity (AAEO) Department to file a formal discrimination complaint.

Students:

1. Students are responsible for communicating with their service providers. Students who are having difficulties with their service providers should complete and submit the "It's Not Working, I Need Help Notification of a Complaint" form to the OSA director or appropriate PAL as soon as possible.

2. Students are required to set up an appointment with the OSA director or appropriate PAL to discuss the problem/complaint. This appointment should be made as soon as possible after the problem has been identified/complaint has been filed.

Possible Performance Issues:

- Notetaker is continually late with notes.
- Notetaker takes incomplete and sloppy notes.
- Alternative Tests arrangements are not ready at the appropriate time.

Students who are experiencing difficulties in class or with their instructors must notify the director of the OSA or the appropriate PAL. **Do Not Wait Until The End Of The Term Or After Receiving A Final Grade To Make Contact.**

Service Provider:

Service providers will also complete the "[It's Not Working, I Need Help Notification of a Complaint](#)" form when issues arise regarding a student's utilization of services.

EQUAL OPPORTUNITY COMPLAINT PROCEDURE No. 03-05-050

**Effective Date: October 10, 1996; Revised July 8, 1999;
October 14, 1999; December 27, 2001**

1. Introduction

A. In accordance with the Affirmative Action Equal Opportunity Program of OHSU, the procedures that follow are established to provide an opportunity to request and receive consideration of any complaints relating to services and/or terms and conditions of employment or education that are believed to be the result of prohibited discrimination.

B. The procedures described below are applicable to student, trainee, employee, patient or applicant for educational programs, services or employment who believes that s/he has been the victim of illegal discrimination on the basis of race, color, religion, marital status, national origin, sex, sexual orientation, age, disability, Vietnam era veteran's status, or any other applicable basis in law. These procedures are promulgated for their accessibility, simplicity, speed, and high

standards of fairness in seeking redress of perceived injustices. The Affirmative Action & Equal Opportunity (AAEO) Department shall provide assistance to any person at any point in the process.

C. Persons who make use of these procedures are entitled to a fair investigation without fear of harassment or retaliation. Retaliation of any kind taken against anyone as a result of that person's using or attempting to use these procedures, cooperating in an investigation, or participating in any manner in any activities under these procedures is prohibited and shall be regarded as a separate and distinct grievable matter.

D. These complaint procedures are intended to fulfill the requirements of Title 41, Part 60 of the Code of Federal Regulations, any other applicable federal or state law(s), regulations, or policies concerning institutional mechanism for the resolution of Equal Opportunity Complaints and to provide a procedure for non-disciplinary personnel decisions in matters of discrimination.

2. Definitions

"Appropriate Administrator": The administrator having responsibility for the work, service, or academic unit involved and who is not an accused party or a complainant. This person has responsibility for the Appropriate Individual identified in Step 1.

"Appropriate Individual": The person with direct responsibility for the work service or academic unit involved, such as the immediate supervisor, patient advocate or advisor.

"Week days": Excludes Saturday, Sunday and any holiday officially designated by OHSU policies.

3. The Complaint Procedure

A. Step 1: Informal Process

Any person having a discrimination complaint and who is eligible to use this procedure is encouraged to bring the complaint to the attention of the Appropriate Individual with direct responsibility for the work, service, or academic unit involved (i.e., immediate supervisor,

patient advocate representative, or advisor), as soon as possible from the date that the person knew or should have known of the alleged discrimination. Upon being notified of the matter, the Appropriate Individual shall notify the AAEO Department. The Appropriate Individual and the complainant shall meet to discuss the complaint in an attempt to resolve the matter in a satisfactory manner, but the extent of the investigation is at the discretion of the AAEO Department. For purposes of this document, a satisfactory resolution is one that is acceptable to the complainant, the Appropriate Administrator, the party or parties complained against (Respondent), and the AAEO Department.

The AAEO Department shall assist in implementing the resolution(s). Within ten (10) days of the meeting between the complainant and the Appropriate Individual, the AAEO personnel or the Respondent's manager shall send a conclusion letter to the complainant stating the resolution of the complaint.

B. Step 2: Formal Complaint filed with the AAEO Department

If the complainant, the party or parties complained against and the Appropriate Individual are not able to reach a mutually acceptable resolution of the complaint, the complainant may file a written complaint with the AAEO Department. If the complainant chooses not to use STEP 1, then the written complaint should be filed as soon as possible from the time the complainant knew or should have known of the alleged discrimination. The written complaint shall include a full description of the alleged discrimination and the redress sought. The AAEO Department shall interview the complainant, conduct an appropriate investigation into the facts surrounding the complaint, and attempt to arrive at a satisfactory resolution as defined above. An appropriate investigation is one that conforms to the AAEO Department procedures and includes, among other things, notice of the complaint to any party accused of discrimination (Respondent) and an opportunity for any such party to present, and have considered, any relevant information. After completing the investigation or arriving at a satisfactory resolution, the AAEO Department shall prepare a fact-finding report and recommendations to the Appropriate Administrator for corrective action, if necessary.

The Appropriate Administrator or the AAEO Director shall inform the complainant and the Respondent of OHSU's decision concerning the recommendation(s) contained in the Step 2 report. The AAEO Department shall assist in implementing the action(s) taken in response to the complaint. The AAEO Department shall periodically inform the Appropriate Administrator of the progress in implementing these action(s) and keep one another apprised.

C. Patient Complaints

If the complainant is a patient with a complaint relating to a disability, and the patient is not satisfied with the results of Step 2, the patient may request a hearing before an Affirmative Action Complaint Committee. Such a hearing shall be conducted in accordance with an established protocol developed by the AAEO Department.

D. Further Review

All other complainants who are not satisfied with the results of Step 2 may contact the Oregon Bureau of Labor and Industries.

Background:

- **OAR Chapter 572, Division 16**
- **OAR 580-15-090**
- **formerly Policy No. 03-50-020**

Related policies, procedures and forms:

Responsible office: AAEO Department

Office For Student Access

Appendix



Office for Student Access
Academic & Student Affairs

**Registration
Office for Student Access**

Date: _____

Name: _____
Last First Middle Initial

Email Address: _____

Local Address: _____

City State Zip Code

Local Phone Number: () _____ Work Phone Number: () _____

Permanent Address: _____

City State Zip Code

Phone Number (Permanent): () _____

Social Security # ____-____-____ Date of Birth(m/d/y) _____ Gender: M F

School: SoM _____ Program: _____

~~SOSE SoN~~ _____

SoD _____

AH _____

~~SoN OGI~~ _____

What year/level in school: _____

Which Campus: _____

Expected Graduation: _____

~~EDUCATIONAL INFORMATION: Schools Attended~~

~~Name of School: Dates: Major: Diploma or Degree~~

~~Did you receive accommodations at your previous institution(s)?~~

~~_____ Yes _____ No~~

~~Which school? _____~~

~~What accommodations? _____~~

DISABILITY INFORMATION:

Type of Disability _____

Cause _____

What difficulties do you experience as a result of your disability?

What services are you requesting to accommodate your disability?

What accommodations/compensatory strategies have been successful for you in the past?

Are you taking any medications for this disability? No Yes

If yes, Drug name(s) & Dosage(s):

Side affects/_experiences (if any):

EDUCATIONAL INFORMATION: Schools Attended

Name of School: Dates: Major: Diploma or Degree

Did you receive accommodations at your previous institution(s) for this disability? Yes

No

Which school?

What accommodations?

Send information to:

Martha R. Smith
Office for Student Access
Oregon Health & Science University
Mail Code L349
3181 SW Sam Jackson Park Road
Portland, OR 97239

Ph: 503-494-0082
Fax: 503-494-7519
e-mail: osa@ohsu.edu



**Office for Student Access
Academic & Student Affairs**

Registration Agreement

- A. I understand that I am registering for services from the Office for Student Access at Oregon Health & Sciences University and that I may be eligible for services such as information, referral, accommodations, academic adjustments and/or auxiliary aids that may be needed for access to courses, activities, programs, services, or facilities.
1. I understand that the University needs disability information to provide services and to conduct reporting and research functions. This data is classified by disability.
 2. I understand that as a user of the Office of Student Access, I am responsible for reviewing the rights and responsibilities pertaining to disability access.
 3. I understand that I will not be eligible for services if I do not provide documentation of a diagnosed disability, do not have a diagnosed disability, or do not follow Office for Student Access and University policies and procedures.
- B. I understand that if I request the Office for Student Access to facilitate accommodations on my behalf, they may need to consult with other University personnel and share information about my condition per the Confidentiality Statement.

Name (print): _____

Signature: _____ **Date:** _____

OSA Staff Signature: _____ **Date:** _____



Office for Student Access
Academic & Student Affairs

**Office for Student Access
Accommodation Request Form**

Date: _____

Name: _____
Last First Middle Initial

Email Address: _____

Local Address: _____

City

State

Zip Code

Local Phone: () _____ Work Phone: () _____

Request For:

Term: _____ Year: _____ School & Program: _____

**General Accommodation Request (this includes accommodations at clinical sites)
Please be specific:**

Specific Course Accommodation Requests:

<u>Course#</u>	<u>Where</u>	<u>Prof./instructor</u>	<u>Requested accommodation</u>
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All accommodation requests must be supported by disability documentation on file with OSA



Office for Student Access
Academic & Student Affairs

Office for Student Access
Consent for Release of Information

Name _____ Date _____

SS# _____ Birthdate _____

I hereby authorize the following person/agency to release specified records and information as noted.

Name of Person/Agency holding records:

Name _____ Phone _____

Agency _____

Address _____

City _____ State _____ Zip _____

Information to be Released:

The release of these documents is limited for the purpose of assessment of disability status and if appropriate to determine **academic** accommodations **and academic adjustments**. All student disability related information is kept in accordance with state and federal regulations.

This release is valid from _____ to _____

Student Signature _____ Date _____

Send information to:

Martha Smith
Office for Student Access
Oregon Health & Science University
Mail Code L349
3181 S.W. Sam Jackson Park Road
Portland, OR 97239-3098
Ph: 503-494-0082
Fax: 503-494-7519

Office for Student Access

"It's Not Working, I Need Help" Form ~~Notification of a Complaint~~

Date: _____

Date Received: _____

Name of Person Completing Report: _____

School: _____

Course: _____

Program: _____

What is the Nature of the Problem ~~Complaint~~?

Name of Person(s), if any, involved:

Service Provider: _____

Faculty: _____

Facilities: _____

Student: _____

What do you Suggest to Resolve this Issue?

-Do not write below/For office use only-

OFFICIAL RESPONSE:

FINAL RESOLUTION/AGREEMENT
RESOLVED _____

DATE

EDUCATIONAL INFORMATION: _____ ~~Schools Attended~~

Name of School: _____ **Dates:** _____ **Major: Diploma or Degree**

Did you receive accommodations at your previous institution(s)?

_____ Yes _____ No

Which school? _____