

Office of Accessibility Resources

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To ensure the provision of reasonable and appropriate academic accommodations and services, stud submit documentation of their disability to the Office of Accessibility Resourcestents with disabilities at a bight of the provision and services, studies and services and services are also acceptable to the office of Accessibility Resourcestents with disabilities at a bight of the provision of their disabilities at a bight of the provision of their disabilities at a bight of the provision of their disabilities at a bight of the provision of their disability to the Office of Accessibility Resourcestents with disabilities at a bight of the provision of their disabilities at a bight of the provision of their disabilities at a bight of the provision of their disabilities at a bight of the provision of their disabilities at a bight of the provision of their disabilities at a bight of the provision of th

This confidential selfdisclosure form is for initial notification purposes only regarding a student's disability Reasonable accommodations and services will be determined based upon a review of the student's documentation, followed by a meeting with the student and the Access Relistources Coordinator.

Student Information

Student Name:	D	Pate:
Preferred Name (if not first name):		Date of Birth://
Cayuga Student I Number:		
Mailing Address:		
City:	State:	Zip Code:
Student Phone Number:	Additional Phone Num	nber:
Personal Email:	Cayuga E <u>mail:</u>	

	Prospective student for: Fall 'Spring 'Summer Year:
	Currently enrolled student
	Transfer studentcurrently attend another institution
Campus Attending (s	elect all that apply): Auburn 'Fulton 'Online
Disability-Related Inf	<u>ormation</u>
Please describe your	disability:
Please list anaccomn	nodations you are seeking:
r lease list arraccomi	nodations you are seeking.
y Do you receive	e assistance from ACCE8? 'Yes 'No 'Not Sure
A Do you receive	
Documentation of Dis	
Documentation of Dis	sability
Documentation of Dis x Have you subr x Do you have o	sability mitted documentation of your disability to our office?Yes 'No 'Not Sure
Documentation of Dis x Have you subr x Do you have o x Did you receiv	sability mitted documentation of your disability to our office Yes 'No 'Not Sure or can you obtain documentation of your disability? Yes 'No 'Not Sure
Documentation of Dis x Have you subr x Do you have o x Did you receiv x Have you utiliz A link to Documentati	e accommodations in high school (IEP or 504 Plan) sability sability 'No 'Not Sure 'No 'Not Sure 'No 'Not Sure