

Office of Disability Services
Brooks Student Center
PO Box 1287
Lexington, NC 27293
tel. (336) 249-8186 ext. 6224 or 6242
fax (336) 248-6714

Request for Placement Testing* Accommodations

Return this form to the Office of Disability Services. This form does NOT serve as an Accommodation Plan. Please notify The Office of Disability Services as soon as possible to provide ample time to review each request and supporting documentation.

Name: _____ Date: _____
Address: _____ City _____ State _____
Zip _____ Telephone #: _____ Student ID # (or Date of Birth): _____

Check whether you are requesting accommodations for:

College Placement Testing Other Test: _____

Please indicate your disability or medical condition. Check all that apply:

Learning Disability
Chronic Medical Condition
Physical Disability (mobility impairment)
Psychiatric Disability (psychological or emotional)
Visual Impairment or Blindness
Deaf or Hard-of-Hearing
Traumatic brain Injury
Other (Please describe): _____

Please indicate the types of accommodations you are requesting:

Extended time for testing
 One and half times the standard amount
 Twice the standard amount (Double time)
Reader for testing
Scribe for testing (answer recorded or written for student)
Use of computer for testing
Distraction reduced environment for testing
Other (please list): _____

Section 504 & The ADA allow colleges to require disability documentation in order to determine the most appropriate accommodations and services that a student will need. The Office of Disability Services holds all disability documentation in the strictest confidence and will not release any of the documentation without the written permission of the student. Guidelines for documentation are available upon request and on the website. Please submit all disability documentation with this form and return to the Office of Disability Services.

*This form may be used for the Acuplacer, Asset, NET, and TABE placement tests proctored by the Admissions Office of Davidson County Community College.