

Office of Academic Affairs

Information and Release Form for ADA Status

If you have a documented disability, please self-identify at this time by completing and returning this form so that we may assist you in setting up reasonable accommodations at Pacific School of Religion.

Last Name First Name M. I.

Address City State Zip Home Telephone

Campus Address Box # Date of Birth Social Security #

NATURE OF MY DISABILITY:

ACCOMMODATIONS USEFUL IN THE PAST:

ACCOMMODATIONS WHICH MAY BE REQUESTED AT PACIFIC SCHOOL OF RELIGION:

I will be submitting documentation from the following and authorize release of disability related information to Pacific School of Religion.

Name Address Telephone Credentials

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I understand that information will be released to the Director of Academic Advisement and may be shared with Pacific School of Religion officials and employees for the purpose of coordinating services and accommodations. Per requirements of the ADA, I understand that the Office of Academic Affairs requires documentation that establishes eligibility prior to my receiving services. This release will serve for the duration of my enrollment at Pacific School of Religion unless otherwise requested.

Signature

Date

Please return this form to the Director of Academic Advisement as soon as possible. If you have any questions or concerns, you may contact us at 510-849-8252.