CONTENTS

Mission Statement........................................................................................................... 3
Purpose............................................................................................................................ 3
Services.......................................................................................................................... 3
Students Requesting Disability Services......................................................................... 4
Disabilities and the Law................................................................................................. 4
Admission Procedure...................................................................................................... 5
Academic Accommodations of Students with Disabilities............................................... 6
  Accommodation Letters for Professors...................................................................... 6
  Testing Accommodation.............................................................................................. 6
  Use of Tape Recorders............................................................................................... 6
  Equipment Loan.......................................................................................................... 6
  Auxiliary Services....................................................................................................... 6
  Note taker Services..................................................................................................... 6
  Instructor Notes.......................................................................................................... 6
  Audio Textbook Services............................................................................................ 6
  Sign Language Interpreter Services........................................................................... 7
  Course Substitution..................................................................................................... 7
  Classroom Accessibility............................................................................................... 7
  Scanner/Reader Services............................................................................................. 7
Special Housing............................................................................................................... 7
Course Substitutions...................................................................................................... 7
Service Animals............................................................................................................. 8
Other Modifications....................................................................................................... 8
Required Documentation............................................................................................... 9
Procedures for Requesting/Obtaining Accommodations................................................ 9
Appeal Process................................................................................................................ 10
Confidentiality.................................................................................................................. 11
Screening/Referral for Students with Suspected Disabilities............................................ 11
Availability of Services Contract.................................................................................... 12
Appendix A.....Disability Verification Forms................................................................. 13
  Authorization for Release of Information................................................................. 14
Appendix B......Learning Disabilities Documentation Checklist................................. 15-18
Appendix C......Attention Deficit Disorder Documentation Checklist............................ 19-22
Appendix D......Food Allergy Documentation Checklist............................................. 23-25
Appendix E......Diabetes Mellitus Documentation Checklist....................................... 26-28
Appendix F......Seizure Disorder Documentation Checklist.......................................... 29-31
Appendix G......Other Medical Conditions Documentation Checklist....................... 32-34
Appendix H......Psychological Disabilities Documentation Checklist.......................... 35-37
Appendix I......Approved Accommodation Form......................................................... 38-40
Appendix J......Policy on Service Animals................................................................. 41-43
Mission Statement

The mission of the Office of Disability Services is to assist students with disabilities in achieving access to higher education and to promote their ongoing personal and educational success, as well as increase the awareness and responsiveness of the campus community to students with disabilities.

Purpose

The Office of Disability Services provides information and supportive services to students with disabilities. Once students have provided documentation of a disability as outlined in the manual, they may be eligible to receive appropriate educational accommodations.

Services

The Office of Disability Services will recommend reasonable and appropriate accommodations based on the documentation for eligible students with disabilities. Any student on the university campus or at the centers who can provide recent documentation of one or more disabilities may qualify for services under the American with Disabilities Act (Amended 2009) or Section 504 of the Rehabilitation Plan. A disability is defined as: any condition that substantially limits one or more major life activity. Services are contingent upon appropriate documentation of a disability.

The following are examples of the types of disabilities that might require services:

- Visually Impaired
- Motor Impaired
- Learning Disabled
- Communication Disorder
- Health Impaired
- Attention Deficit Disorder
- Psychological Disorder
Services may include but are not limited to:

- Extended time for tests
- Separate/quiet testing environment
- Note taking assistance
- Enlarged written materials
- Taped lectures
- Books on Tape
- Preferential seating
- Medical exit/re-entry

**Students Requesting Disability Services**

New students must request services and complete the documentation process. Once documentation is provided, students must make an appointment for an intake interview. Returning students do not need to schedule an appointment to request services for the semester and need only to notify the Office of Disability Services they are enrolled. At the beginning of each term, students should send an email to: adaoffice@saintleo.edu.

Documentation can be submitted for review at any time during the year; however, requests for accommodations must be made no later than two weeks from the end of the semester. Requests submitted after this deadline will be considered for the following term.

Students requesting books on tape, special seating, use of special equipment, captioning, and interpreters must request these services one semester prior to anticipated need. Students who require the assistance of a service animal must notify the Assistant Director, Office of Disability Services.

For information concerning the Americans with Disabilities Act, contact the Department of Justice’s ADA website.

**Disabilities and the Law**

Section 504 of the 1973 Federal Rehabilitation Act and the 1990 American with Disabilities Act (ADA) require that Saint Leo University makes reasonable modifications of policies and practices and provide certain individualized services to otherwise qualified students with disabilities. In the spirit of these federal mandates and because of a commitment to education, Saint Leo University assists those who, although disabled in some way, are potentially capable of the successful completion of a degree program. Individuals with disabilities may include, but are not limited to, those with learning disabilities (including Attention Deficit Disorder), visual or auditory impairments, speech impairments, mobility impairments, emotional illness, head trauma or medical conditions that substantially limit one or more major life activities as specified in the law. Specific accommodations will be decided on a case-by-case basis, in accordance with federal law, depending on the type and extent of the disability.
ADMISSION PROCEDURE

Students with identified disabilities are required to complete the same admissions process and to meet the same admissions requirements as other applicants. Federal law prohibits admission personnel from asking a student whether or not he/she has a disability. However, it is in the best interest of the student to self-disclose his/her disability to the Assistant Director of Disability Services in the beginning of the admissions process. Early identification will allow the student and the Assistant Director of Disability Services to work together to evaluate the need for and availability of appropriate accommodations.

A student with a disability must be otherwise qualified in order to be admitted into the university and into a specific major. That is, the student must be able – with accommodations – to compensate for his/her disability in order to meet the requisite academic standards of the institution. The Assistant Director of Disability Services will make every attempt to make clear to the student the essential components of each program and to advise the student on how his/her strengths and weaknesses will likely affect completion of the program.

If students do not identify themselves as disabled until after registration, some accommodations may not be immediately available. The sooner a student self-discloses, the more quickly appropriate services can be arranged.
Academic Accommodations of Students with Disabilities

Students requesting accommodations are responsible for the validation of the disability through Saint Leo University’s Office of Disability Services. The ODS will review medical or psychometric materials and, when necessary, request additional information. Since this information is confidential, the ODS will communicate only the existence of a disability and the need for accommodations. The student may feel free to disclose additional information to professors.

Accommodation Letters for Professors: The ODS staff will discuss classroom needs with the student and then, upon request, provide the student with individualized and authorized accommodations. The student shall request official notification of accommodations for each instructor each term.

Testing Accommodations: Test administration may be modified or adapted for students with disabilities when appropriate. Such accommodations may include extended time, alternate location, assistance of a writer, use of a word processor, large print, or oral administration. Recommendations for accommodations are made by the ODS director. Students and teachers may make any arrangements for testing accommodations which are fair to the student and to the class requirements. A student and teacher may also decide to utilize alternative test locations that do not involve the ODS.

Use of Tape Recorders: Students with disabilities who are unable to take or read notes have the right to tape record class lectures for their personal study only. Lectures taped for this purpose may not be shared with other people without the consent of the lecturer.

Equipment Loan: The ODS loans items such as tape recorders, electronic note-taking pens, graphing calculators, and digital voice recorders on a short term basis.

Auxiliary Services: Auxiliary services are those which assist students in meeting needs specifically related to their disability. These services are approved by the Office of Disability Services after reviewing the appropriate medical and/or diagnostic material. Auxiliary services include: note taker services, taped textbook services, and sign language interpreting services. For more information on these services please contact the Office of Disability Services.

Note Taker Services: Note takers take lecture notes and review these notes for clarification, when requested. Note takers are either from outside the class or recruited by the student and teacher from within the class.

Instructor Notes: Professors can provide a written version of the class notes or PowerPoint notes from visual presentations.
Audio Textbook Services: The Office of Disability Services will help students obtain textbooks on CD from Recording for the Blind and Dyslexic (RFB&D). The ODS will loan students the required CD players designed specifically for this purpose.

Sign Language Interpreter Services: Interpreters are available upon request. Requests for interpreter services must be made well in advance due to the limited number of interpreters.

Classroom Accessibility: The ODS facilitates the location of classrooms to accommodate students who have access challenges.

Scanner/Reader Services: When textbook materials are unavailable from RFB&D or the student has classroom material for which he/she needs a reader, students may request reader services from the Assistant Director of Disability Services. Readers read the material to cassette tape (with or without the student present). If the student would prefer the materials to be put onto a disc so that the student can later listen to it using a speech output device on a computer, staff in the Office of Disability Services will scan the material.

Special Housing

Any special residential living request should be made in writing to the Assistant Vice President for Student Services. The Office of Disability Services will work with the Director of Campus Life and the Assistant Vice President to determine if the housing request is an appropriate accommodation. All requests must be supported by documentation filed with the Assistant Director of Disability Services and must be made before the beginning of the semester.

Course Substitutions

Saint Leo University works with its students with disabilities to identify reasonable and appropriate accommodations and auxiliary aids so the students can have the opportunity to be successful in their academic work. Such accommodations must be balanced against not changing the essential elements of a course in a substantial manner.

In the very rare cases where there are no reasonable accommodations within the framework of a course, students with disabilities may request a course substitution. The important considerations in making determinations would be:

- Documentation prepared by an appropriately licensed professional that is clear and comprehensive.
- Documentation demonstrates that accommodations within the framework of the course have been appropriately considered.
- The availability of a substitute course that would provide a meaningful experience approximating the original course requirements.
A preliminary request must be made to the Office of Disability Services which would then work collaboratively with the proper academic unit to determine the essential nature of the course and the relationship to the requirements of the major or degree.

Service Animals

Saint Leo University recognizes the value and need of service animals to assist some students with disabilities. The Americans with Disabilities Act (ADA) defines service animals as “…any animal individually trained to do work or perform tasks for the benefit of an individual with a disability, including, but not limited to, guiding individuals with impaired vision, alerting individuals who are hearing impaired to intruders or sound, providing minimal protection or rescue work, pulling a wheelchair, or fetching dropped items.”

The university reserves the right to ask for verification of the training that has been provided as well as the nature of the service being performed. These services must be more than providing emotional well being. Saint Leo reserves the right to ask that the animal undergo additional training or be removed if it does not fit this description or if it has become disruptive. For example, a properly trained service animal will remain at its owner’s feet. It does not run freely around, bark or growl repeatedly at other animals, bite or jump on people, or urinate or defecate inside buildings. An animal that engages in such disruptive behavior shows that it has not been successfully trained to function as a service animal in public settings.

The good health of the animal is the responsibility of the owner. If the animal is in ill health (bowel/bladder control problems, fleas, etc.) the owner may be asked to remove it from the university.

OTHER MODIFICATIONS

Requests for all other modifications should be made to the Assistant Director of Disability Services (or Center Directors if the student is off campus) in a timely manner. Students are encouraged to visit the Office of Disability Services as soon as possible upon their arrival on campus and to make any requests as soon as a need for accommodation arises.

Center and online students may send requests for accommodations and documentation to the Office of Disability Services via email: adaoffice@saintleo.edu or via fax: 352-588-8605 or regular mail: The Office of Disability Services, MC 2010, Saint Leo University, Saint Leo, FL 33574.

Students requesting exceptions to any portion of the policy should notify the Office of Disability Services. Policy exceptions shall be considered on a case by case basis depending upon the needs of individual students.
REQUIRED DOCUMENTATION

The Office of Disability Services provides reasonable accommodations for students with documented disabilities. Students must provide sufficient documentation of disability before services or accommodations can be provided (see Appendix A). Documentation must contain a diagnosis of the specific disability and a rationale for requested accommodations. Testing must be current – within three years for most disabilities. Medical and psychiatric disabilities may require more recent updates. Because the provision of all accommodations and services is based on an assessment of the impact of the student’s disabilities on his/her academic performance, it is in the student’s best interest to provide recent and appropriate documentation.

- **Student with a physical, visual, speech or medical disability**
  Documentation should include a copy of medical reports and/or a letter from a physician stating specific diagnosis, prognosis, medications, if applicable, and the educational implications for the student. Please see appendices for appropriate protocols.

- **Student with a hearing loss**
  Documentation must include an audiogram showing the extent of the loss and the educational impact to the student. Please see appendices for appropriate protocols.

- **Student who has a mental impairment (emotional/psychological disorder)**
  Documentation should include a statement from a licensed mental health practitioner and a statement of medication form the prescribing psychiatrist. The report should include summaries of the following:
    1. Diagnostic interview
    2. Assessment of mental status including test results
    3. DSM IV diagnosis
  Please see appendices for appropriate protocols.

- **Student with a learning disability or an Attention Deficit Disorder**
  Documentation must be provided by a professional experienced in diagnosing learning disabilities, preferably a licensed psychologist who will provide a psycho-educational evaluation. Please see appendices for appropriate protocols.

PROCEDURES FOR REQUESTING/OBTAINING ACCOMMODATIONS

There are detailed procedures for use of services or accommodations. Failure to comply with the procedures may result in the delay of services or accommodations. In order to request an accommodation(s), students must do the following:
1. Upon submitting documentation to the Office of Disability Services, the student should schedule a meeting to determine the appropriate accommodations. An approved accommodation form will be completed and kept in the student’s file. Online or Center students may submit documentation via email: adaoffice@saintleo.edu or fax: 352-588-8605.

2. Since Saint Leo University encourages students with disabilities to practice self-advocacy; students are encouraged to speak with individual faculty members concerning accommodations. Faculty members will receive a letter confirming accommodations from the Office of Disability Services. If a faculty member does not comply with the student’s request, the student should contact the Office of Disability Services.

3. All requests must be made in a timely manner according to the outlined procedures.

4. Students requesting exceptions to the policy should notify the Office of Disability Services. Policy exceptions shall be considered on a case by case basis depending upon the needs of individual students.

**APPEAL PROCESS**

If a student follows proper procedures and is denied a specific accommodation, the student may wish to appeal the decision. The appeals process is as follows:

1. The student must submit an appeal, in writing, to the Office of Disability Services within 10 working days of when the accommodation was denied. The appeal should include a statement describing the requested accommodation and an explanation of need.

2. The Director of Academic Student Support Services will assemble a panel to review the appeal within 10 working days of its filing. The review panel will include the student’s advisor (or substitute faculty member), one Academic Dean (for an appeal of an academic matter) or one Student Affairs staff (for an appeal of a non-academic matter), and the Assistant Director for Academic Student Services.

3. The panel will review the student’s appeal and the explanation for denial and make a decision to uphold or reverse the decision.

4. To appeal the panel’s decision, the student must send a letter of appeal to the Vice President of Academic Affairs within 10 working days of receiving the decision.
The Vice President of Academic Affairs will examine the appeal and the procedure and communicate the final decision.

5. For further action, the student should contact the Regional Office of Civil Rights.

CONFIDENTIALITY

The Office of Disability Services recognizes and honors the importance of the confidentiality of documents containing disability related information. Section 504 of the 1973 Federal Rehabilitation Act guarantees this confidentiality but recognizes that there are situations where releasing partial information to appropriate individuals is in the best interest of the student. Information may be released at the discretion of the Office of Disability Services when there is a compelling reason that the information is necessary to best accommodate the needs of an individual student.

SCREENING/REFERRALS FOR STUDENTS WITH SUSPECTED DISABILITIES

Some students with disabilities arrive at Saint Leo University never having been diagnosed. Such students may have been very skilled in developing coping strategies and compensatory skills that made it possible for them to succeed in high school, but these strategies may prove insufficient for college work. If these students find themselves doing poorly at Saint Leo University, we encourage them to meet with the Office of Disability Services. Although Saint Leo University does not provide psycho-educational evaluations, the Assistant Director in the Office of Disability Services will work with the student and decide if a referral is necessary. The Assistant Director will refer the student to an off-campus licensed psychologist for a complete psycho-educational evaluation and assessment of skills. The cost of the psycho-educational testing is the responsibility of the student.
AVAILABILITY OF SERVICE CONTRACT

I, ____________________________, have read the Saint Leo University Policy and Procedures Manual for Students with Disabilities, including the section entitled Procedures for Obtaining Services. I understand the accommodations and services offered at Saint Leo University as well as the documentation required to receive services. I am also aware of the proper procedures I must follow to request and receive accommodations. I realize that if I do not follow these policies and procedures in the required time frame, services and accommodations may not be provided.

Signed ______________________________ Date __________________

12
APPENDIX A

RELEASE OF INFORMATION FORMS
AUTHORIZATION FOR RELEASE OF INFORMATION

To: ____________________________

________________________________

________________________________

I, ____________________________, give my permission for the release of information related to my academic, medical, and psychological records, including test results to the Office of Disability Services, Saint Leo University.

________________________________
Signature

________________________________
Social Security Number

________________________________
Date

________________________________
Parent or Guardian’s Signature
(if student is under 18 years)
APPENDIX B

LEARNING DISABILITIES PROTOCOL
Disability Verification Form
Learning Disabilities

TO THE DIAGNOSTICIAN: The Office of Disability Services at Saint Leo University requires that learning disabilities be documented by a psychiatrist, licensed psychologist, or neurologist who has had training and experience in differential diagnosis and direct experience in the diagnosis and treatment of this disorder.

Definition: LD is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning or mathematical skills. These disorders are intrinsic to the individual and presumed to be due to a central nervous system dysfunction and may occur across the life span.
Based on the National Joint Committee on Learning Disabilities definition - 1990

Learning Disabilities can be divided into three broad categories:
Developmental Speech and Language Disorders
   Articulation Disorder
   Expressive Language Disorder
   Receptive Language Disorder
Academic Skills Disorders
   Developmental Reading Disorder
   Developmental Writing Disorder
   Developmental Mathematics Disorder
Other
   Coordination disorders
   Learning handicaps not covered above

Documentation of a Learning Disability must include:

Comprehensive Diagnostic Interview
Neuropsychological or Psychoeducational Evaluation including both:
   Measure of Intellectual Functioning
   Measure of Academic Performance
Additional measures may be necessary to rule out other impairments.

The diagnosis must be recent – within three years of the request for accommodations.

SUGGESTIONS FOR CLINICAL MEASURES OF INTELLECTUAL FUNCTIONING
   Kaufman Adolescent and Adult Intelligence Test
   Stanford-Binet 5
   Wechsler Adult Intelligence Scale
   Test of Non-Verbal Intelligence
SUGGESTIONS FOR CLINICAL MEASURES OF ACADEMIC PERFORMANCE
- Woodcock-Johnson Psycho-educational Battery
- Wechsler Individual Achievement Test
- Stanford Test of Academic Skills

SUGGESTIONS FOR CLINICAL MEASURES OF ATTENTION, MEMORY AND LEARNING
- Detroit Test of Adult Learning Aptitude
- Wechsler Memory Scales
- WAIS Working Memory Index

SUGGESTIONS FOR CLINICAL MEASURES OF EXECUTIVE FUNCTIONING
- Stroop Color and Word Test
- Wisconsin Card Sorting Test
- Train Making Test Parts A and B

SUGGESTIONS FOR CLINICAL MEASURES OF VISUAL-PERCEPTUAL-MOTOR
- Bender Visual Motor Gestalt Test
- Finger Tapping Test
- Purdue Pegboard Test

SUGGESTIONS FOR CLINICAL MEASURES OF LANGUAGE SKILLS
- Boston Naming Test
- Test of Adolescent and Adult Language

Essentially, the assessment must establish the diagnosis of Learning Disability as well as demonstrate the level of impact the condition will have on the student’s academic performance.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information.

FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE DIRECTOR OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.

The results of all measures used in the evaluation must be submitted to the Office of Disability Services. Specific test and subtest scores should be submitted using percentile, standard scores or scaled scores.
1. Name of Student:__________________________________________

2. Diagnosis:________________________________________________

3. Date(s) of Diagnosis:____________________

4. Assessment Procedures Used:__________________________________
   ___________________________________________________________________
   ___________________________________________________________________

5. Prescribed medication(s):_______________________________________

DIAGNOSTICIAN INFORMATION

Print Name and
Title_________________________________ Date:_______________

Signature__________________________ License#_____________________

Address______________________________

Phone__________________________ Fax______________________________

Please return this form and all supporting documentation to:

Office of Disability Services
Phone: 352-588-8464   Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida  33574
APPENDIX C

ATTENTION DEFICIT DISORDER DOCUMENTATION PROTOCOL
Disability Verification Form
ADD/ADHD

The Office of Disability Services at Saint Leo University requires that this disorder be documented by a psychiatrist, a licensed psychologist, or a neurologist who has had training in differential diagnosis and direct experience in the diagnosis and treatment of this disorder in adolescent and adult populations.

Definition – from the American Psychological Association (APA).

ADHD – inattentive
1. Six or more symptoms of inattention – some of which must be present before the age of seven.
2. Some impairment from the symptoms must be present in two or more settings
3. Clear clinical evidence that the symptoms cause a significant impairment in functioning
4. The diagnosis must rule out other conditions
5. The documentation must be recent – usually within three years

ADHD – impulsive
1. Six or more symptoms of hyperactivity-impulsivity – some of which must be present before the age of seven.
2. Some impairment from the symptoms must be present in two or more settings
3. Clear clinical evidence that the symptoms cause a significant impairment in functioning
4. The diagnosis must rule out other conditions
5. The documentation must be recent – usually within three years

SUGGESTIONS FOR CLINICAL MEASURES OF ADHD – This list is not meant to be complete and/or exclusive.

Continuous Performance Tests
   - Connors Continuous Performance Test
   - Integrated Visual and Auditory Continuous Performance Test
   - Test of Variables of Attention
   - Gordon Diagnostic System

Rating Scales
   - Behavior Rating Inventory of Executive Functioning
   - Connors’ Teacher Rating Scales
   - Connors’ Parent Rating Scales
   - Connors’ Adult ADHD Rating Scales
Observational Forms (for classroom settings)
  ADHD School Observation Code
  ADHD Direct Observation System

SUGGESTIONS FOR CLINICAL MEASURES OF ACADEMIC PERFORMANCE
  Woodcock-Johnson Psycho-educational Battery
  Stanford Test of Academic Skills
  Wechsler Individual Achievement Test

SUGGESTIONS FOR CLINICAL MEASURES OF INTELLECTUAL FUNCTIONING
  Kaufman Adolescent and Adult Intelligence Test
  Stanford-Binet 5
  Wechsler Adult Intelligence Scale

Essentially, the diagnosis must establish the diagnosis of ADHD as well as demonstrate the level of impact the condition will have on the student’s academic performance.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information

**FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE DIRECTOR OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.**

The results of all measures used in the evaluation must be submitted to the Office of Disability Services. Specific test and subtest scores should be submitted using percentile, standard scores or scaled scores.
1. Name of Student: ____________________________

2. Diagnosis: ___________________________________________

3. Date(s) of Evaluation: ________________

4. Assessment Procedures ___________________________________

_____________________________________________________________________

5. Prescribed medication(s): _________________________________________

_____________________________________________________________________

_____________________________________________________________________

DIAGNOSTICIAN INFORMATION

Print Name and Title___________________________________________

Date:___________________________

Signature_________________________

License#_______________________

Address________________________________________________________________

Phone___________________________________

Fax____________________________________

Please return this form and all **required** supporting documentation to:

Office of Disability Services
Phone: 352-588-8464  Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida  33574
APPENDIX D

FOOD ALLERGY DOCUMENTATION PROTOCOL
Disability Verification Form
Food Allergy

The Office of Disability Services at Saint Leo University requires that this disorder be documented by a physician and/or a licensed Allergist who has had training in this medical condition and direct experience in the diagnosis and treatment of this disorder in adolescent and adult populations.

Definition – from Ferris’s Clinical Advisor
The patient has a history of recurring allergic reaction to specific food groups. Diagnosis is made on the basis of patient history and current testing by an experienced allergist. Multiple physical findings and clinical presentations are present with the possibility of multiple reactions to food products with complications requiring accommodations.

SUGGESTIONS FOR CLINICAL AND DIAGNOSTIC MEASURES OF FOOD ALLERGIES – These suggestions are not meant to be limiting or exhaustive.

A comprehensive assessment battery and the resulting diagnostic report should include:
1) Background information including patient history and medical documentation
2) Evidence of existing impairment – testing should be recent – within 3 years.
   Though some conditions may require more recent evaluation if observed changes have occurred in the individual’s performance or if there are new medications prescribed or discontinued since the previous assessment was conducted.
3) Relevant testing including scores
4) Specific diagnosis
5) Rule-out of alternative diagnoses or explanations

The assessment must establish the diagnosis of food allergy in accordance with current professional standards and techniques and demonstrate the level of impact the condition will have on the student’s academic performance.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information.

FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE OFFICE OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.
The results of all measures used in the evaluation must be submitted to the Office of Disability Services.

1. Name of Student:_________________________________________

2. Diagnosis:________________________________________________

3. Date(s) of Diagnosis:_______________

4. Assessment Procedures Used:________________________________
   __________________________________________________________________
   __________________________________________________________________

5. Prescribed medication(s):_____________________________________

   DIAGNOSTICIAN INFORMATION

Print Name and Title_________________________________________ Date:____________________
Signature________________________________ License#_____________________
Address________________________________________________________
Phone________________________ Fax______________________________

Please return this form and all supporting documentation to:
Office of Disability Services
Phone: 352-588-8464   Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida  33574
APPENDIX E

DIABETES MELLITUS DOCUMENTATION PROTOCOL
Disability Verification Form
Diabetes Mellitus

The Office of Disability Services at Saint Leo University requires that this disorder be documented by a physician and/or a licensed Allergist who has had training in this medical condition and direct experience in the diagnosis and treatment of this disorder in adolescent and adult populations.

Definition – from Ferris’s Clinical Advisor
Diabetes Mellitus refers to the syndrome of hyperglycemia resulting from many different causes. It can be classified into two types: Type 1 or insulin dependent and Type 2 or non-insulin dependent.

SUGGESTIONS FOR CLINICAL AND DIAGNOSTIC MEASURES OF DIABETES MELLITUS is based on a fasting glucose test greater than or equal to 126mg/do or non-fasting greater than or equal to 200mg/dl (ADA criteria). Multiple physical findings and clinical presentations vary with the possibility of multiple complications needing accommodations.

A comprehensive assessment battery and the resulting diagnostic report should include:
1) Background information including patient history and medical documentation
2) Evidence of existing impairment – testing should be recent – within 3 years.
   Though some conditions may require more recent evaluation if observed changes have occurred in the individual’s performance or if there are new medications prescribed or discontinued since the previous assessment was conducted.
3) Relevant testing including scores
4) Specific diagnosis
5) Rule-out of alternative diagnoses or explanations

The assessment must establish the diagnosis of diabetes mellitus in accordance with current professional standards and techniques and demonstrate the level of impact the condition will have on the student’s academic performance. The diagnosis must be based on a comprehensive assessment battery that does not rely on any one test. It should determine the current impact of the disorder on the individual’s ability to function in an academic setting.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information.
FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE OFFICE OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.

The results of all measures used in the evaluation must be submitted to the Office of Disability Services.

1. Name of Student:_________________________________________

2. Diagnosis:________________________________________________

3. Date(s) of Diagnosis:__________________

4. Assessment Procedures Used:_________________________________

_________________________________________________________________

_________________________________________________________________

5. Prescribed medication(s):_____________________________________

DIAGNOSTICIAN INFORMATION

Print Name and Title_________________________________________ Date:________________

Signature_______________________________________ License#____________________

Address__________________________________________________________

Phone________________________________ Fax___________________________________

Please return this form and all supporting documentation to:

Office of Disability Services
Phone: 352-588-8464  Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida  33574
APPENDIX F

SEIZURE DISORDER DOCUMENTATION PROTOCOL
Disability Verification Form
Seizure Disorder

The Office of Disability Services at Saint Leo University requires that this disorder be documented by a physician and/or a licensed Allergist who has had training in this medical condition and direct experience in the diagnosis and treatment of this disorder in adolescent and adult populations.

Definition – from Ferris’s Clinical Advisor
Seizure disorder is marked by complete or partial hypersynchronous neuronal activity with the onset of abnormal electrical activity originating in a focal region or lobe of the brain resulting in muscle reactions/contractions. Consciousness may be impaired or preserved.

SUGGESTIONS FOR CLINICAL AND DIAGNOSTIC MEASURES OF SEIZURE DISORDER is made on the basis of a complete and thorough patient history and testing by an experienced Neurologist.

A comprehensive assessment battery and the resulting diagnostic report should include:
1) Background information including patient history and medical documentation
2) Evidence of existing impairment – testing should be recent – within 3 years.
   Though some conditions may require more recent evaluation if observed changes have occurred in the individual’s performance or if there are new medications prescribed or discontinued since the previous assessment was conducted.
3) Relevant testing including scores
4) Specific diagnosis
5) Rule-out of alternative diagnoses or explanations

The assessment must establish the diagnosis of seizure disorder in accordance with current professional standards and techniques and demonstrate the level of impact the condition will have on the student’s academic performance. The diagnosis must be based on a comprehensive assessment battery that does not rely on any one test. It should determine the current impact of the disorder on the individual’s ability to function in an academic setting.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information.

FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE OFFICE OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.
The results of all measures used in the evaluation must be submitted to the Office of Disability Services.

1. Name of Student:_________________________________________

2. Diagnosis:________________________________________________

3. Date(s) of Diagnosis:__________________

4. Assessment Procedures Used:_____________________________________
   ___________________________________________________________________
   ___________________________________________________________________

5. Prescribed medication(s):________________________________________

   DIAGNOSTICIAN INFORMATION

Print Name and Title________________________________________ Date:_________________

Signature________________________________________ License#_________________

Address__________________________________________________________

Phone________________________________________ Fax__________________________

Please return this form and all supporting documentation to:

Office of Disability Services
Phone: 352-588-8464  Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida 33574
Disability Verification Form
Other Medical Conditions

The Office of Disability Services at Saint Leo University requires that other medical disorders be documented by a physician and/or a licensed specialist who has had training in the medical condition and direct experience in the diagnosis and treatment of the disorder in adolescent and adult populations.

Definition –
Other types of medical disorders might be vision, hearing, neurological, musculoskeletal, cardiovascular, digestive, lymphatic, hemic, or endocrine impairments.

SUGGESTIONS FOR CLINICAL AND DIAGNOSTIC MEASURES OF OTHER MEDICAL CONDITIONS is made on the basis of a complete and thorough patient history and testing by an experienced specialist.

A comprehensive assessment battery and the resulting diagnostic report should include:
1) Background information including patient history and medical documentation
2) Evidence of existing impairment – testing should be recent – within 3 years.
   Though some conditions may require more recent evaluation if observed changes have occurred in the individual’s performance or if there are new medications prescribed or discontinued since the previous assessment was conducted.
3) Relevant testing including scores
4) Specific diagnosis
5) Rule-out of alternative diagnoses or explanations

The assessment must establish the diagnosis of seizure disorder in accordance with current professional standards and techniques and demonstrate the level of impact the condition will have on the student’s academic performance. The diagnosis must be based on a comprehensive assessment battery that does not rely on any one test. It should determine the current impact of the disorder on the individual’s ability to function in an academic setting.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information.

FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE OFFICE OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.
The results of all measure used in the evaluation must be submitted to the Office of Disability Services.

1. Name of Student:___________________________________________

2. Diagnosis:________________________________________________

3. Date(s) of Diagnosis:________________

4. Assessment Procedures Used:_________________________________

   __________________________________________________________________

   __________________________________________________________________

5. Prescribed medication(s):_______________________________________

   DIAGNOSTICIAN INFORMATION

Print Name and Title______________________________________________ Date:____________

Signature________________________________________________________ License#_____________________

Address____________________________________________________________________________________

Phone________________________ Fax______________________________________________________________

Please return this form and all supporting documentation to:

Office of Disability Services
Phone: 352-588-8464 Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida 33574
APPENDIX H

PSYCHOLOGICAL DISABILITIES INCLUDING PTSD AND GENERALIZED ANXIETY DISORDER
Disability Verification Form
Psychological Disabilities including PTSD and generalized anxiety disorder

The Office of Disability Services at Saint Leo University requires that all disorders be documented by a physician and/or a licensed psychologist who has had training in the medical condition and direct experience in the diagnosis and treatment of this disorder in adolescent and adult populations.

Definition – Psychological disability is any emotional impairment which will significantly impede the student’s ability to access the educational program at Saint Leo University.

SUGGESTIONS FOR CLINICAL AND DIAGNOSTIC MEASURES OF OTHER MEDICAL CONDITIONS– These suggestions are not meant to be limiting or exhaustive.

A comprehensive assessment battery and the resulting diagnostic report should include:
1) Background information including patient history and medical documentation
2) Evidence of existing impairment – testing should be recent – within 3 years.
   Though some conditions may require more recent evaluation if observed changes have occurred in the individual’s performance or if there are new medications prescribed or discontinued since the previous assessment was conducted.
3) Relevant testing including scores
4) Specific diagnosis
5) Rule-out of alternative diagnoses or explanations
6) DSM-IV diagnosis

The assessment must establish the diagnosis of the psychological condition in accordance with current professional standards and techniques and demonstrate the level of impact the condition will have on the student’s academic performance.

The examiner may also suggest appropriate accommodations based on the clinical evidence. However, for each accommodation, the examiner must provide a rationale – a detailed explanation supporting the need for each accommodation. The suggestions must correlate with specific functional limitations supported by the data. Each accommodation must be explicitly supported by the diagnostic information.
FINAL DECISIONS REGARDING A STUDENT’S ELIGIBILITY FOR ACCOMMODATIONS WILL BE DETERMINED BY THE OFFICE OF DISABILITY SERVICES AT SAINT LEO UNIVERSITY.

The results of all measures used in the evaluation must be submitted to the Office of Disability Services.

1. Name of Student:_________________________________________

2. Diagnosis:________________________________________________

3. Date(s) of Diagnosis:__________________

4. Assessment Procedures Used:__________________________________________

____________________________________________________________________
____________________________________________________________________

5. Prescribed medication(s):____________________________________________

DIAGNOSTICIAN INFORMATION

Print Name and Title____________________________________ Date:_____________

Signature________________________________ License#______________________

Address___________________________________________________________

Phone________________________________ Fax___________________________

Please return this form and all supporting documentation to:
Office of Disability Services
Phone: 352-588-8464   Fax: 352-588-8605
Saint Leo University
P. O. Box 6665, MC 2010
Saint Leo, Florida  33574
APPENDIX I

APPROVED ACCOMMODATION FORM
Official Notification of Authorized Accommodations

Dear Instructor:
The accompanying page is verification of a documented disability for a student who is currently enrolled in your course. Please regard this student’s information as confidential. Oral and written communication pertaining to the student’s disability must be limited only to those individuals who have a compelling need to know.
The Americans with Disabilities Act (ADA) does not guarantee that every student with a disability will be successful or receive a passing grade. ADA is about access, not entitlement, to optimize academic success. As the Assistant Director of Disability Services, I am here to help you meet the needs of the student. Please feel free to contact me with any questions or concerns at 352-588-8464.

Thank you,

Amanda Becker
Amanda Becker,
Assistant Director of Disability Services
Saint Leo University
Saint Leo University
Office of Disability Services

Name of Student: 
SLU ID: 
Location: 

Verification Date:

___Notetaker/ Instructor’s Notes/PowerPoints (if used)
___Books on tape
___Tape recorder for lectures
___Student aids (for tests, exams, papers, etc.) such as: dictionary, editing checklist, revision checklist, calculator,

manipulatives, etc.

___No penalty for spelling – for in-class writing
___No penalty for grammatical/capitalization/punctuation errors – for in-class writing

___Alternative examination procedures: *

___directions to test being read to student
___test questions read
___student give answers orally rather than in writing (essay exams)
___student uses tape recorder to record his/her answers, then transcribes answers onto test paper
___student not required to use separate answer sheet or columns to mark answers, e.g. Scantron
___student permitted to number, underline, or circle responses
___tests written in large type
___use of scribe
___use of word banks
___altered test format
___use of word processor, speller, dictionary
___extended time for tests (1.5x) *
___testing in a distraction free environment **
___Word processor w/ spell check and/or grammar check
___Access to reader
___medical exit/re-entry
___Special seating
___Other

*Student must speak with instructors concerning these accommodations.

**Students should remind the instructor at least 1 week in advance of the test. Students must sign up in Disability Services to have their tests proctored at least 48 hours in advance. Students who do not present for their scheduled test within 10 minutes of the appointment will be asked to reschedule. This time limit is to safeguard the validity of the test and the testing process.

Contact the Office of Disability Services with specific questions or concerns regarding this student’s accommodations.
Office: 352-588-8464
Email: adaoffice@saintleo.edu
APPENDIX J

POLICY ON SERVICE ANIMALS
Policy on Service Animals

Service animals are animals trained to assist people with disabilities in the activities of normal living. The Americans with Disabilities Act (ADA) defines service animals as “…any…animal individually trained to do work or perform tasks for the benefit of an individual with a disability, including, but not limited to, guiding individuals with impaired vision, alerting individuals who are hearing impaired to intruders or sounds, providing minimal protection or rescue work, pulling a wheelchair or fetching dropped items.” If an animal meets this definition, it is considered a service animal regardless of whether it has been licensed or certified by a state or local government or a training program.

Definition

Pet: A domestic animal kept for pleasure or companionship. Pets are not permitted in university facilities.

Service Animal: Any animal individually trained to do work or perform tasks for the benefit of a person with a disability. Service animals are usually dogs, but may be monkeys. A few other animals have been presented as service animals. A service animal is sometimes called an assistance animal. Questions regarding service animals should be directed to the Assistant Director, Office of Disability Services.

TYPES OF SERVICE DOGS

1. Guide Dog is a carefully trained dog that serves as a travel tool for persons with severe visual impairments or who are blind.
2. Hearing Dog is a dog that has been trained to alert a person with significant hearing loss, or who is deaf, when a sound, e.g., knock on the door, occurs.
3. Service Dog is a dog that has been trained to assist a person who has a mobility or health impairment. Types of duties the dog may perform include: carrying, fetching, opening doors, ringing doorbells, activating elevator buttons, steadying a person while walking, helping a person up after the person falls, etc. Service dogs are sometimes called assistance dogs.
4. SSig dog is a “Social Signal” dog trained to assist a person with autism. The dog may alert the partner to distracting repetitive movements common among those with autism, allowing the person to stop the movement (e.g., hand flapping). Recognizing familiar persons in a crowd, steering around a mud puddle, or responding to others’ social signals are possible roles for a SSig Dog. A person with autism may have problems with sensory input and need the same support services from a dog that a dog might give to a person who is blind or deaf.
5. Seizure Response Dog is a dog trained to assist a person with a seizure disorder. How the dog serves the person depends on the person’s needs. The dog may stand guard over the person during a seizure or the dog may go for
help. A few dogs have somehow learned to predict a seizure and warn the person in advance.

REQUIREMENT FOR FACULTY, STAFF AND STUDENTS

1. Allow a service animal to accompany the partner at all times and everywhere on campus, except where service animals are specifically prohibited. The courts have upheld the rights of service animal owners to take animals into food-service locations.
2. Do not pet a service animal; petting a service animal when the animal is working distracts the animal from required tasks.
3. Do not feed a service animal. The service animal may have specific dietary requirements. Unusual food or food at an unexpected time may cause the animal to become ill.
4. Do not deliberately startle a service animal.
5. Do not separate or attempt to separate a partner/handler from his or her service animal.

REQUIREMENTS OF SERVICE ANIMALS AND THEIR PARTNERS/HANDLERS

1. Rabies Clearance: The animal must have tags or certification of rabies clearances.
2. Under Control of Partner/Handler: Service animals are not permitted to run freely around, bark or growl repeatedly at other animals, bite or jump on people, or urinate or defecate inside buildings.
3. Animal Health: The good health of the animal is the responsibility of the owner. If the animal is in ill health (bowel/bladder control problems, fleas, etc.) the owner may be asked to remove it from the university.