



A Campus of The California State University
Student Disability Resource Office

Laboratory Building 110 *ph: (707)654-1283 *fax: (707)654-1079

Request for Test/Course Accommodations

Student Name:	Date:
Phone #:	SSN:
Email:	Semester/Year:

Requesting Accommodations for the Following (check all that apply):

- A. All Course Test/Exams
- B. Entry Level Mathematics Test (ELM) Date of Exam:
- C. English Placement Test (EPT) Date of Exam:
- D. Graduate Writing Exam (GWE) Date of Exam:

Course Title/Number:	Instructor:	Meeting Days/Times:
<i>example: English 112 - American Lit.</i>	<i>Sandra Gonzales</i>	<i>MWF 4-5:30pm</i>
1		
2		
3		
4		
5		
6		
7		

Test/Course Accommodations Requested (check all that apply):

- Testing Time (circle one): 1 1/2 Time Double Time
- Test Environment (circle one): Quiet Separate
- Spelling: spell check, dictionary, spelling errors waived
- Calculator: use of calculator
- Use of Recorder
- Note Taker/Access to Course Notes
- Alternative Media Text
- Other (please specify): _____

****ALLOW 7 WORKING DAYS TO PROCESS REQUEST****

FOR OFFICE USE ONLY: SDR Specialist/Counselor Signature: _____		
_____ Approved	_____ Not Approved	Date Completed: _____

Copies: 1 copy: Student / original: File