

University of Georgia
 Regents' Center for Learning Disorders
 Request to Review Outside Evaluations

Date: _____ From: _____ Institution: _____

Enclosed, please find documentation submitted on behalf of _____, who is requesting, or is likely to need, accommodations based on: (check all that apply)

- RCLD Report
 Re-Review with additional documentation?
 Re-Review for additional accommodations?
 Veteran
 Learning Disabilities
 Speech/Language
 Neurocognitive Disorder
 Attention-Deficit/Hyperactivity Disorder
 Sensory Issues
 Borderline Intellectual Functioning
 Psychological Disorder
 Autism Spectrum Disorder
 Other Issues _____
 Acquired Brain Injury
 Mobility _____

***It is the responsibility of the student, disability service provider, and evaluating psychologist to request specific accommodations.
 Release of Information from the student allowing this disclosure is on file or uploaded with the documentation.***

Test Accommodations	Course Accommodations	RCLD Approval Required RHSC/Accuplacer/Learning Support
<input type="checkbox"/> Reduced Distraction Environment <input type="checkbox"/> Extended Time <input type="checkbox"/> 1.5x <input type="checkbox"/> 2.0x <input type="checkbox"/> Reading <input type="checkbox"/> Writing <input type="checkbox"/> Math <input type="checkbox"/> STOP the Clock Breaks <input type="checkbox"/> Text to Speech Software/Reader <input type="checkbox"/> Speech to Text Software/Scribe <input type="checkbox"/> Word Processing Program Without Spell Check <input type="checkbox"/> Spell Check <input type="checkbox"/> Word Prediction Software <input type="checkbox"/> Grammar Check <input type="checkbox"/> Keyboard Access (fine motor skills) Non-programmable Calculator Formula Sheet Oral Test Accommodations Questions Repeated by Instructor Write Questions Before Composing Response Extended Time to Formulate Replies on Oral Exams <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____	Books in Digital Format Assistance Obtaining Class Notes Extended Time for In-Class Assignments Priority Seating Priority Registration Computer/Tablet for Completing Class Assignments Reduced Course Load Flexibility with Classroom Participation Appeal for Course Substitution Foreign Language Departmental Math Requirement Other _____ Flexibility with Attendance and Related Deadlines Class Breaks Other _____ Other _____ Other _____	<input type="checkbox"/> Placement/Admissions Tests (Accuplacer, etc.) <input type="checkbox"/> Text to Speech Software/Reader <input type="checkbox"/> Speech to Text Software <input type="checkbox"/> Spell Check <input type="checkbox"/> Formula Sheet <input type="checkbox"/> Substitution for RHSC Foreign Language Deficiency <input type="checkbox"/> Two Additional Semesters in Learning Support <input type="checkbox"/> Reading <input type="checkbox"/> English <input type="checkbox"/> Math <input type="checkbox"/> Core Math Course Substitution <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____

