

**DISABILITY ACCESS SERVICES (D.A.S.)  
Request for Services Form**

**Name** \_\_\_\_\_ **Term** \_\_\_\_\_

**ID#** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Preferred Phone#** \_\_\_\_\_ **Alternate#** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

- By completing this form, I understand that a notice will be sent to my instructor(s).
- I understand that I must complete a new request for each term.
- Students needing alternative text accommodations must complete an additional form.
- Note taking services is not a replacement for class attendance.
- Recorded lectures are for study purposes only and may not be sold, licensed or otherwise distributed. Students must provide their own recording capability.
- If you change your registration, notify DAS of changes.

**Only request accommodations which have been approved through D.A.S. If you have additional needs, please make an appointment to discuss them.**

<b>COURSE NAME</b>	<b>SECTION</b>	<b>INSTRUCTOR</b>
<b>Classroom:</b>	Note Taker	Recorder
	Spell Checker	Alternative Text
	Table/Chair _____ <small>(Wheelchair, Reserved Seating, Etc.)</small>	Sign Language Interpreter (ASL or PSE)
	Other _____	
<b>Testing:</b>	1 ½ Time	Testing Center/Semi-Private Room
	Spell Checker	Taped Test
	Private Room (if available)	Scribe
	Other _____	

**Please turn over for additional courses.**

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Spell Checker	Sign Language Interpreter (ASL or PSE)	
Table/Chair _____ (Wheelchair, Reserved Seating, Etc.)	Other _____	
<b>Testing:</b> 1 ½ Time	Testing Center/Semi-Private Room	Taped Test
Spell Checker	Private Room (if available)	Scribe
Other _____	_____	

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This document can be made in alternative formats by contacting Disability Access Services at (763) 493-0555 (voice) or (763) 493-0558 (TTY).