

Application for Services / Self-Report Form

Broward College students requesting accommodations must self-identify, submit qualifying documentation, and complete this application prior to meeting with the campus coordinator. Completion of this form does not guarantee services. We will contact you for an interview.

Date: _____ Name: _____ D.O.B: _____

Cell#: _____ Student ID#: _____

Home/BC email: _____

Emergency Contact Name: _____

Relationship: _____ Emergency Contact Cell#: _____

Did you submit documentation of your disability including a diagnosis? ___ Yes ___ No

Please provide documentation for each disability requiring accommodations.

What is (are) your disability(ies)?

Based on your disability, which academic accommodations are you requesting, and why?

Classroom Accommodations:

Testing Accommodations:

What is your major/career pathway?

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___ Documentation complete ___ Interview appointment date and time: _____

___ Documentation incomplete – Student apprised of what is needed:

___ Student will contact Accessibility Resources for appointment

Email completed application to Sarahis Vega: svega@broward.edu