



Center for Student Opportunity
Disability Services
614 W. Superior – Tyler-Van Dusen
Alma, MI 48801-1599
Phone: 989-463-7247 Fax: 989-463-7126
linnrm@alma.edu

Request for Accommodations

CONFIDENTIAL

June 23, 2015

RE: *Student Name*

Dear *Professor Name*,

Student Name has provided documentation to qualify as a student who, according to the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, is entitled to special considerations and accommodations. Please note that this information is considered confidential.

Accommodations for students with disabilities are individually determined with input from the student, instructor, and disability services staff. We would appreciate any input and feedback in this process. The following accommodations have been determined to be reasonable:

- *Accommodation 1*
- *Accommodation 2*
- *Accommodation 3*

It is my job to assist you in carrying out these accommodations. Please call me with any questions or concerns you may have at **ext.7247** or you can email me at **linnrm@alma.edu**. Also, please return a signed copy to my office in the Center for Student Opportunity or fax to 463-7126. I look forward to working with you.

Sincerely,

Rhonda Linn
Assistant Director of the Center for Student Opportunity
Academic Support and Disability Services

I have received a copy of this letter and will provide the accommodations listed above.

Instructor Name (printed)

Signature

Date

Class title/section