

Request for Temporary Accommodations

Date: _____

Student Name: _____ Student ID: _____ Phone: _____

Classification: ____ Freshman ____ Sophomore ____ Junior ____ Senior ____ Graduate

Temporary disabilities include, but are not limited to, broken limbs, burns, post-surgery recovery, and other similar conditions that temporarily impair or influence a student's ability to fully participate in academic activities. Students with a temporary disability or injury are not considered disabled by the law. The University is not obligated to provide services to students with temporary, non-chronic impairments that last less than three months and are not covered under the Americans with Disabilities Act (1990).

However, some support services may be provided to eligible students with temporary conditions. Services are provided only for the duration of the functional limitations associated with the temporary disability. The eligibility process is the same for all students with disabilities.

Please attach a signed diagnostic statement on letterhead from your treating professional that includes the following information:

- ☐ Diagnosis - date of onset, original diagnosis, and description of present symptoms
- ☐ A description of the expected progression or stability of the disability/condition over time
- ☐ Current treatment plan
- ☐ A description of the current functional impact on the student within the academic setting
- ☐ Recommended accommodation(s)
- ☐ Credentials of the diagnosing professional including certification, licensure, professional training.

Requested Accommodation(s) ____ Attached or ____ Listed below

Name and Credentials of Licensed Professional

Please submit documentation to: Center for Student Success, Learning Assistance
Celeste Justice
1000 Fisk Avenue
Brownwood, TX 76801
Phone: 325 649-8620