



Policy to Request Accommodation

Benedictine University will make every effort to provide eligible students with reasonable accommodations based on individual learning needs and recommendations. In order to provide accommodations in a timely manner, the University requires reasonable notice (particularly in consideration of an auxiliary aid or service) of specific needs and requested accommodations prior to the first day of the term in which the student is enrolled.

Four Steps to Request Accommodations:

1. Student self identifies to the assigned case manager, located in Kindlon Hall, Room 310, in the Academic Support Center.
2. The Accommodations Services Request Form and the Verification For are completed and sent to the Academic Support Center.
3. Student provides a current (within 3 years) evaluation report (testing results) and documentation (high school IEP or 504 plan or previous proof of prior accommodations) for

<u>Medical</u>	<u>Emotional & Psychoeducational</u>
Vocal Vision Hearing Mobility Anatomical Loss Cancer and other diseases Neuro- muscular/ skeletal Heart AIDS Other Medical diagnosis	Autism Spectrum Disorder ADHD Learning Disabilities Intellectual Disability Generalized Anxiety Disorder Panic Disorder Other Psychiatric diagnosis
and/or	

4. Verification form and documentation are sent to the assigned case manager, the documents are reviewed for appropriateness and subsequent determination of

accommodations by the Accommodations Review Team without disclosure of private information.

5. Once an accommodation request is approved, the student will be notified by the case manager and student approved academic accommodations forms are provided to the faculty member by the case manager.
6. If the request is denied, the student will be provided guidance on either providing more information or additional information regarding on-campus support services. The student may also appeal the Committee's decision through the Committee on Academic Standing.

Documentation of Disabilities

It is the responsibility of each student who seeks accommodations and services from Benedictine University to provide a comprehensive, written evaluation of his/her disability from a licensed clinical professional. In order to verify the student's eligibility under Federal, State, and University mandates, and to document his/her need for accommodations and services, this evaluation must meet specific requirements. **All mental health diagnosis should include the corresponding ICD 10 code for that disorder.**

A. Learning Disabilities Documentation: Testing must be comprehensive and appropriately current within 3 years. It is not acceptable to administer only one test in making a diagnosis. Minimally, the domains to be addressed must include, but not be limited to, the following:

1. Aptitude: All subtests, scaled, and standards scored must be included.
2. Achievement: The student's current levels in functioning in reading, mathematics, and written language must be addressed (standard scores).

Additional formal and informal tests such as timed and untimed administration and a writing sample are recommended to corroborate underachievement in specific academic areas.

3. Information processing: Specific areas of information processing (for example, short- and long-term memory, reasoning, listening, sequential memory, auditory and visual processing, and processing speed) must be assessed (standard scores). Use of subtests from the Wechsler Adult Intelligence Scale – Revised and/or the cognitive report of the Woodcock-Johnson Psycho-Educational Test Battery – Revised are acceptable. Additional testing designed to corroborate the

existence of processing disorders as identified by Wechsler or the Woodcock-Johnson are recommended.

4. A summary of findings. If a student is found to have a disabling condition, the assessment summary should explain the relationship between this condition and the problems the student has been encountering in academic and other settings; and
5. Recommendations about areas in which academic accommodations may be needed.
6. Title, professional credentials, contact information, and signature of the licensed clinician.

B. ADHD Documentation: Diagnosis of attention deficit disorder should be made by a licensed professional(s). This documentation should be appropriately current, with 3 years. The diagnosing professional(s) should have expertise in diagnosing attention deficit disorders in adults and in diagnosing other psychiatric disorders that might coexist with attention deficit disorder. Symptoms of some medical disorders and some psychiatric disorders can resemble symptoms of ADHD. Therefore, the assessing professional(s) should make every effort to obtain relevant information about medical and psychological factors which might be contributing to the student's disabling condition.

An assessment for ADHD must include the following:

1. Interviews and questionnaires which permit the student to describe current concerns and past problems;
2. Observation of the student's behavior;
3. Complete developmental, educational, and medical histories;
4. Diagnosis, date of diagnosis, and specification of the current DSM criteria on which the diagnosis was based;
5. Results of cognitive tests;
6. An evaluation of the effectiveness of past and current medications if prescribed for relief of ADHD symptoms;

7. A summary of findings. If a student is found to have a disabling condition, the assessment summary should explain the relationship between this condition and the problems the student has been encountering in academic and other settings; and
8. Recommendations about areas in which academic accommodations may be needed.
9. Title, professional credentials, contact information, and signature of the licensed clinician.

C. Psychological Disability Documentation: Diagnosis of psychological disabilities should be made by a licensed professional. Documentation must be comprehensive and be appropriately current, within 3 years.

An assessment for a psychological disability must include the following:

1. Interviews and questionnaires which permit the student to describe current concerns and past problems;
2. Complete developmental, educational, and medical histories;
3. Observations of the student's behavior;
4. Diagnosis, date of diagnosis, and specification of the current DSM criteria on which the diagnosis was based;
5. Information concerning any prescribed medication, including that used by the student during the assessment process, and its effect on the student;
6. Approximate duration of the disorder;
7. A summary of findings. If a student is found to have a disabling condition, the assessment summary should explain the relationship between this condition and the problems the student has been encountering in academic and other settings; and
8. Recommendations about areas in which academic accommodations may be needed.

9. Title, professional credentials, contact information, and signature of the licensed clinician.

D. Physical Disability Documentation: Records must indicate the nature, type, and degree of physical disability and in some cases, the expected duration of the disability, with specific recommendation for accommodation(s) and rationale from an appropriate medical professional.

Documentation of a physical disability must include:

1. Current verification of the diagnosis;
2. Manifestations/ effects and level of severity of the condition;
3. Information concerning any prescribed medication, and its effect on the student;
4. An assessment of functional limitations in an academic setting; and
5. Recommendations about areas in which academic accommodations may be needed.
6. Title, professional credentials, contact information, and signature of the licensed clinician.

Temporary accommodation: Student seeking accommodations for a *temporary* disability must present medical documentation no older than 60 days.

Additional information:

The professional(s) conducting the assessment and rendering diagnosis of specific disabilities must be qualified to do so. It is inappropriate for students to provide documentation from a clinical professional who is a family member.

There must be clear and specific evidence and identification of the student's disabilities. Individual learning or processing differences do not, by themselves, constitute a learning disability. Assessment summaries should demonstrate that the student's difficulties in acquiring and using various academic skills are not the result of other factors such as sensory impairment, serious emotional disturbance, cultural differences or insufficient instruction.

Benedictine University complies with the definition of handicapped persons as found in the Rehabilitation Act of 1973 (PL 93-112) and subsequently stated in the Americans with Disabilities Act of 1990 (PL 101-336).

“Any person who (i) has a physical or mental disability which substantially limits one or more of such person’s major life activities, (ii) has a record of such an impairment, or (iii) is regarded as having such an impairment.”

Definition of Terms

Physical or mental impairment is defined as, but not limited to, the following:

-any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the body systems: neurological; musculoskeletal; specific sense organs; respiratory (including speech organs); cardiovascular; reproductive; digestive; genitourinary; hemic and lymphatic; and endocrine

-any mental or psychological disorder, such as intellectual disability or developmental disabilities, organic brain syndrome or acquired brain injury, emotional or mental illness, and specific learning disabilities

-any contagious and non-contagious diseases and conditions such as orthopedic, visual, speech and hearing impairment; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer, heart disease; diabetes; mental retardation; emotional illness; HIV diseases (whether symptomatic or asymptomatic) and tuberculosis.

Major life activities are defined as functions such as self-care, performance of manual tasks, walking, seeing, hearing, breathing, learning or working.

Has a record of such impairment is defined as having a history of, or has been incorrectly classified as having, a mental or physical impairment that substantially limits one or more major life activities.

Is regarded as having an impairment is defined as having a physical or mental impairment that does not substantially limit major life activities as a result of the attitudes of others toward such an impairment; or has none of the impairments listed in the above definitions, but is treated as having such an impairment, such as persons with a limp or persons with disfiguring scars.

Exclusions:

An individual with a disability does not include a person who is currently engaging in the illegal use of drugs. However, an individual who is currently participating in, or who has successfully completed, a supervised drug rehabilitation program and is not currently engaging in the illegal use of drugs, or who is otherwise no longer engaging in

such us, shall be considered an individual with a disability if the individual otherwise fits the definition of a disabled person as described in the above definitions.

Information

For further information, Lisle students please stop by the Academic Support Center in Kindlon Hall, Room 312, or call 630-829-6041. Mesa students please stop by Gillett Hall, Room 230, or call 480-878-7514.