

REQUEST FOR DISABILITY ACCOMMODATION GUIDELINES

You have indicated that you may require an accommodation to take an examination and/or meet licensure requirements. In order for the Board to consider your request for accommodation, you must submit acceptable documentation of your disability and a proposal for accommodation. **The application and all requested disability accommodation material must be mailed to the above address.**

THE BOARD MUST RECEIVE THE FOLLOWING INFORMATION:

1. Current statement verifying a disability:
 - A) Documentation from a physician, mental health professional, or other professional must be appropriate to the disability.
 - B) Statement must be on professional's letterhead and include the address and phone number of the professional.
 - C) To ensure inclusion in your application file, this sheet or a photocopy of this sheet, including the identifying information below must be submitted by the professional along with the letter or statement verifying a disability.
2. Specific proposal for accommodation as it relates to the disability: Please include information regarding any accommodations for the disability which you may have received in the past.
3. If you are reapplying to take an examination or for licensure and have submitted acceptable documentation of a disability with your prior application, please contact the Board office regarding the provision of disability accommodation. You will need to submit this sheet with your application but, if requesting the same or similar accommodation; you may not need to submit documentation from a professional verifying a disability.

APPLICANT: _____

DATE: _____

LICENSES BEING APPLIED FOR: _____

PROFESSIONAL SUBMITTING DOCUMENTATION OF A DISABILITY:

PROFESSIONAL'S TELEPHONE #: () _____