

PROFESSIONAL LICENSING BOARDS DIVISION

237 Coliseum Drive Macon, Georgia 31217 (404) 424-9966

REQUEST FOR ADA ACCOMMODATIONS FOR APPLICANTS FOR LICENSURE BY EXAMINATION

In compliance with the Americans with Disabilities Act (ADA Public Law 101-336), the Professional Licensing Boards Division provides for reasonable accommodations by designated vendors for exam candidates with disabilities that may interfere with their performance on a Licensure Examination. Disability is defined as a "physical or mental impairment that substantially limits one or more of the major life activities, which include, walking, seeing, hearing, speaking, breathing, learning, working, caring for one's self, and performing manual tasks.

To take an examination for licensing and/or meet licensure requirements, applicants may request an accommodation under the American with Disabilities Act by submitting this application form and all supporting documentation to the respective Board **and/or** a designated vendor as instructed.

For the Board to consider your request for accommodation, you must submit this <u>proposal for accommodation</u> form along with acceptable <u>documentation of your disability</u> from your treating medical professional to the Board. You may submit this form and the accompanying documentation by email to your licensing board*. Please note, accommodation requests should be submitted and approved prior to scheduling your test date.

If you are <u>instructed to submit your request to a designated vendor</u>, application/registration for accommodations must accompany the examination application, be in writing, and received by the designated agent of the board by the application deadline accompanied with appropriate documentation as indicated in the Request for Disability Accommodation Guidelines.

The following are **not** protected under the ADA: Test anxiety and English as a second language.

Items Required for an Accommodation:

- Documentation from a qualified professional with expertise in the diagnosed disability which must include:
 - Recognized diagnosis found in the Diagnostic and Statistical Manual of Mental Disorders (DSM) or International Statistical Classification of Diseases and Related Health Problems (ICD).
 - o Identification of the specific standardized and professionally recognized test-assessments given (e.g., Woodcock-Johnson, Weschler Adult Intelligence Scale).
 - The scores resulting from testing and interpretation of the scores and evaluations.
 - Recommendations for testing accommodations with a stated rationale as to why the requested accommodation is necessary and appropriate for the diagnosed disability
- Letter from candidate defining the disability and specific testing accommodations desired
- Letter from College ADA coordinator defining what accommodations the candidate was given during their education program (if applicable). Absence of accommodations from the education program does not preclude the applicant from being eligible for testing accommodations for licensure by examination.

This form must be completed by a physician, mental health professional or other health care practitioner with expertise directly related to your disability and must include a current statement of disability and a specific proposal for accommodation as it relates to your disability. Documentation must be on the health care provider's official letterhead and must include the provider's address and phone number.

The requested accommodation must relate directly to your documented disability.



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Applicant Information			
Applicant Last Name:	Applicant First Name:		
Applicant Middle Name:	Date of Birth:		
Applicant Phone:	Applicant Email:		
Health Care Provider Information			
Provider Name:			
Provider Address:			
City:	State:	Zip:	
Phone:	Credentials:		

Submit your Disability Accommodations Request Form and Documentation to one of the following:

*Check One	Profession	Email Address
	Architects/Interior Designers	<u>Trades1@sos.ga.gov</u>
	Athletic Trainers	PLB-Healthcare2@sos.ga.gov
	Auctioneers	Trades3@sos.ga.gov
	Barbers & Cosmetology	Trades2@sos.ga.gov
	Chiropractic Examiners	Trades1@sos.ga.gov
	Conditioned Air Contractors	Trades4@sos.ga.gov
		Examboards-Healthcare@sos.ga.gov
	Dietitians	Or Fax to: 866-888-7127
		Examboards-Healthcare@sos.ga.gov
	Dispensing Opticians	Or Fax to: 866-888-7127
	Electrical Contractors	<u>Trades4@sos.ga.gov</u>
	Engineers & Land Surveyors	Trades1@sos.ga.gov
	Foresters	Trades1@sos.ga.gov
	Funeral Director & Embalmers	Trades3@sos.ga.gov
	Geologists	Trades1@sos.ga.gov
		Examboards-Healthcare@sos.ga.gov
	Hearing Aid Dealers & Dispensers	Or Fax to: 866-888-7127
	Landscape Architects	Trades1@sos.ga.gov
	Librarians	Trades2@sos.ga.gov
	Long-Term Care Facility Administrators	Trades3@sos.ga.gov
	Low Voltage Contractors	Trades4@sos.ga.gov
	Massage Therapists	PLB-Healthcare2@sos.ga.gov
	Nursing (APRN, RN, LPN)	nursing@sos.ga.gov
	Occupational Therapists	PLB-Healthcare2@sos.ga.gov
	·	Examboards-Healthcare@sos.ga.gov
	Optometry	Or Fax to: 866-888-7127
	Physical Therapists	PLB-Healthcare2@sos.ga.gov
	Plumbing Contractors	Trades4@sos.ga.gov
	Podiatry	PLB-Healthcare2@sos.ga.gov
	Private Detectives/Security Guards	Trades3@sos.ga.gov
	Professional Counselors/Social Workers/ Marriage and	Examboards-Healthcare@sos.ga.gov
	Family Therapists	Or Fax to: 866-888-7127
		Examboards-Healthcare@sos.ga.gov
	Psychologists	Or Fax to: 866-888-7127
	Residential/General Contractors	<u>Trades4@sos.ga.gov</u>
		Examboards-Healthcare@sos.ga.gov
	Speech Language Pathologists & Audiologists	<u>Or Fax to: 866-888-7127</u>
	Utility Contractors	<u>Trades4@sos.ga.gov</u>
	Veterinary Medicine	PLB-Healthcare2@sos.ga.gov
	Water/Wastewater Treatment Plant Operators	Trades3@sos.ga.gov