Disability Accommodations Request
Information and Instructions

Thank you for your interest in the Florence-Darlington Technical College ADA Services/Program Accessibility Committee (PAC). This program is designed to assist and accommodate students with special needs and disabilities. Your assistance with this process is required in order to ensure that the appropriate accommodations you request for the current academic year can be provided.

PAC Disability Steps for Students

1) Acceptance into FDTC;

2) Read and sign Rights and Responsibilities Acknowledgement;

3) Fill out the Request for Accommodations Form;

4) Fill out the Information Release Form;

5) Provide a current (within the last three years) Individualized Education Program (IEP) OR current medical documentation. If you plan to submit medical documentation, please include:
   - Diagnosis
   - Prognosis
   - Restrictions or limitations that the disability might dictate
   - Specific reasonable accommodations that are needed
     Must be on letterhead and signed by a doctor - prescription notes will not be accepted.

6) Return all required documentation detailed above to the FDTC PAC Official located in the 100 building, room 100-I OR fax the information to 843.676.8508, Attn: Disability Services/PAC.

Revised September, 2014
FLORENCE-DARLINGTON TECHNICAL COLLEGE
Program Accessibility Committee (PAC)

Rights and Responsibilities

Students have the right to:

1. Expect all disability-related information to be treated confidentially.
2. Receive appropriate accommodations in a timely manner from faculty and ADA Services. Students should have the opportunity to meet privately with faculty to discuss needed accommodations and any other concerns. Please keep in mind that ADA Services is the only office designated to review disability documentation and determine eligibility for appropriate accommodations.
3. Appeal decisions regarding accommodations and auxiliary aids.

Students have the responsibility to:

1. Provide ADA Services with appropriate documentation of the disability.
2. Go to the instructor’s office hours or make an appointment with the instructor to facilitate privacy when requesting accommodations.
3. Initiate requests for specific accommodations in a timely manner, preferably early in the semester.
4. Follow procedures with faculty and ADA Services in order to get the appropriate accommodations.
5. Inform ADA services of the materials you need in alternate format as soon as possible.
6. Notify faculty/ADA Services immediately (preferably within 48 hours) when an accommodation is not being provided completely or correctly.
7. Notify faculty/ADA Services immediately when a decision has been made to not use an accommodation or the accommodation is no longer needed.
8. Act as your own advocate. Use resources on campus to assist with developing advocacy skills and communicating your specific needs and accommodations to faculty.

Acknowledgement of Rights and Responsibilities:

I acknowledge that I have read, understand and received a copy of the above Rights and Responsibilities pertaining to Program Accessibility Accommodations at Florence-Darlington Technical College.

____________________________________  ________________
STUDENT SIGNATURE                           DATE

Revised September, 2014
FLORENCE-DARLINGTON TECHNICAL COLLEGE
Program Accessibility Committee (PAC)

Request for Accommodations Form

Date of Application: ______________________________________________________

Student’s Full Name: ______________________________________________________

Social Security # OR Student ID#: __________________________________________

Program of Study: _________________________________________________________

Disability: _______________________________________________________________

Please check the accommodation(s) you are requesting below:

_____ Alternate Test Format  _____ Lab Accommodations (Specify)
_____ Alternate/Extended Deadlines  _____ Large Print Books
_____ Alternate/Isolated Testing Location  _____ Magnifying Devices (On Loan)
_____ Audiobooks  _____ Note-Taker
_____ Audio Taped Test  _____ Note-Taker Forms
_____ Calculator (Regular)  _____ Oral Testing
_____ Calculator (Talking)  _____ Other Accommodation (Specify)
_____ Campus Disabled Parking Access  _____ Reader
_____ Closed Captioned Television  _____ Special Classroom Seating Arrangement
_____ Customized Classroom or Lab Desks  _____ Voice Recorder (On Loan)
_____ Extended Testing Time  _____ Tutorial Services
_____ Flexible Attendance  _____ Visual Aids
_____ Interpreter/Signer  _____ Voice-Activated Computer

COMMENTS:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

**************************************************************************OFFICIAL USE ONLY**************************************************************************

Documentation Received: _________________________________________________

Approved Accommodations Letter: _________________________________________

Instructor E-mail: _________________________________________________________

Revised September, 2014
FLORENCE-DARLINGTON TECHNICAL COLLEGE
Program Accessibility Committee (PAC)

Information Release Form

Date: 

Student’s Full Name:

Address:

Phone:

Social Security # OR Student ID#:

I, _______________________________ grant permission for

(Please print full name clearly)

Florence-Darlington Technical College (FDTC) to secure, maintain and release records related to

my disability to parties who have a bona fide academic interest in my education at FDTC.

I understand that the above-mentioned is otherwise maintained as strictly confidential

information.


STUDENT SIGNATURE     DATE     FDTC PAC OFFICIAL     DATE

Revised September, 2014