

To: Clinician

Hamilton College offers services on an individual basis to students with documented disabilities. The student listed below has requested support services. Please certify his/her disability diagnosis and fax/return the form to us as soon as possible to the address listed. This information is confidential and will be shared only with members of the Hamilton College administration, health services, counseling staff and faculty involved with coordinating services and accommodations. Thank you.

Name of Student: _____

Specific Diagnosis:** _____

Date of Diagnosis/Time of Onset: _____

Length of Time Working with Student: _____

Most Recent Evaluation: _____

Nature of Disability: Explain the current functional limitations imposed by the condition. Indicate how the disability interferes with or limits any facet of a major life activity, including current participation in courses, programs, or activities of the College. Include the impact of medication or other treatments.

Specific duration, stability or progression of the condition: _____

Current treatment/follow up plan: _____

Assistive and/or adaptive technology needs (please be specific about any hearing, vision or physical access requirements): _____

Specific recommendations for appropriate accommodations, based on disability: _____

Continue on reverse side

Hamilton College
Disability Certification Form
Page 2

Name (Please Print): _____

Certification/Credentials: _____

State Licensure Number (if applicable): _____

Agency/Institution: _____

Address: _____

Area Code/Telephone: _____

Signature: _____ Date: _____

Return by July 1st for the Fall Semester or January 1st for the Spring Semester:

Forward completed forms and documentation to:

Allen Harrison, Jr.
Assistant Dean for International Students and Accessibility
198 College Hill Road
Clinton, New York 13323
Fax: 315-859-4077
Phone: 315-859-4021
aharriso@hamilton.edu

** For diagnosed Learning Disabilities or Attention Deficit Disorder, enclose a psychoeducational evaluation, administered within three years of the date of enrollment, which includes the following:

1. A measure of intellectual or cognitive functioning; Wechsler Adult Intelligence Scale-IV
2. A measure of achievement in reading comprehension, written language, and mathematics such as:
 - Woodcock-Johnson Psycho-Educational Battery-R. Tests of Achievement
 - Kaufman Test of Achievement
 - Scholastic Ability test for Adults
 - Test of Written Language (TOWL)-4
 - Nelson-Denney reading Test
 - Woodcock Reading Mastery Tests-R
 - Stanford Diagnostic Mathematics Test
3. A measure of information processing in one or more of the following areas:
 - Visual and/or auditory processing
 - Memory
 - Processing speed
 - Attention and concentration
 - Perceptual motor skills
 - Other cognitive areas