



Study Abroad Disability Accommodation Request Form

(This form is to be completed by IUP students with disabilities, in conjunction with Disability Support Services, applying for a study abroad program.)

Instructions for Students:

1. Please see the Office of International Education website for more information on disability in study abroad, as well as our informational brochure “Student Diversity in Study Abroad.”
2. Make a short list of the places you would like to study, regardless of accessibility or disability concerns.
3. Meet with an advisor in the OIE to discuss the likelihood of accommodation in programs on your short list.
4. Select a program and apply.
5. Meet with Disability Support Services and complete this form. Plan in advance, as this completed form must be received by the study abroad application deadline, early September for study in the following spring or early January for study in the following fall.



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Instructions for Disability Support Services (DSS):

1. In accordance with DSS procedures, verify that the student is disabled and requires reasonable accommodation in order to participate in the study abroad program.
2. Together with the student, complete the entire Disability Accommodation Request Form (below). Be clear as this information will be faxed or emailed, as is, to the host institution.
3. Indicate what the student's limitations are (based upon the medical/psychological documentation submitted by the student) and what accommodations DSS recommends for the student's participation in the study abroad program. Please define any technical terms such as mobility orientation, closed-captioned, etc. Sites vary greatly on the types of accommodations possible. Providing details and possible alternatives will help the host institution arrive at creative solutions.
4. Forward the completed form to:

IUP Office of International Education
Delaney Hall, Suite B25
920 Grant Street
Indiana, PA 15705
Phone: 724-357-2295
Fax: 724-357-2514



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Instructions for Host Institution:

1. Review the student's accommodation needs.
2. Respond in writing to IUP's Office of International Education indicating the accommodations that you feel you can provide.
3. If the requested accommodation is unavailable, whenever possible suggest alternative means of accommodating the student.
4. Return your response to the Office of International Education:

IUP Office of International Education
Delaney Hall, Suite B25
920 Grant Street
Indiana, PA 15705 15705-1070
U.S.A.

Phone: 011-724-357-2295
Fax: 011-724-357-2514



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BACKGROUND INFORMATION

Since there is much variability within each disability category, the type of accommodations needed can vary significantly. Below, you will find descriptions of the various types of disabilities recognized in the United States. Student needs vary according to each individual. Therefore, it is important for the participating student to clarify the particular accommodations she or he requests. The term **disability** is defined in the United States as an impairment that significantly limits or restricts a major life activity such as hearing, seeing, speaking, breathing, performing manual tasks, walking, caring for oneself, or learning. While not all individuals who have one of the following conditions are disabled, categories of disabilities may include the following:

Chronic health: affect one or more of the systems of the body. This may include cancer, diabetes, epilepsy, HIV-AIDS, etc.

Hearing: can range from students who have difficulty hearing, have lost hearing in one ear, or are completely deaf.

Learning: refers to significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, and/or mathematical abilities, with the presence of average to superior intelligence. This includes such conditions as dyslexia, dyscalculia, and dysgraphia, and can be extended to include attention deficit disorder.

Mobility: range from very limited stamina to paralysis of the lower and/or upper extremities. Conditions that may cause a mobility disability include arthritis, back disorders, cerebral palsy, spinal cord injuries, and neuromuscular disorders.

Psychiatric: diagnosis of a mental illness by a licensed professional. This includes depression, bipolar disorder (may include both depression and manic state), anxiety disorders and schizophrenia.

Brain Injury: results from injury to the head. May cause impairment in mobility, sight, hearing, speaking, personality, and/or thinking.

Visual: includes decreased vision, total blindness, and partial sight such as impaired field of vision.



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ACCOMMODATION REQUEST

(to be completed by DSS staff member and IUP student)

Student's Name _____ Banner ID _____

Local Telephone _____ Email _____

Study Abroad Program _____

Location _____ Dates of Program _____

Office of International Education Contact _____

Telephone _____ Fax 724-357-2514

Email: _____

DSS Staff Completing Form _____

Telephone _____ FAX _____

E-mail _____

Disability Information

DSS Disability Staff: Please briefly describe the nature of the student's disability and how this disability may impact the student's participation in study abroad programs (i.e.. functional limitations).

1. Indicate the disability assistance recommended in the areas listed below (e.g. extra time, special equipment, special locations, classroom set up, etc.).

- a. classroom accessibility (location, furniture, equipment, etc.)



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b. communication

c. taking notes during class

d. reading texts required for class

e. completing exams

2. Indicate any housing recommendations related to the student's disability.



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3. Indicate any transportation recommendations related to the student's disability.

4. Describe any health care recommendations that may require attention while the student is studying abroad.

5. Describe any dietary recommendations related to the student's disability.

1. Other comments or concerns:



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Consent

I give permission for IUP staff to provide information regarding my disability and accommodation request to third parties as needed to process my request for accommodation and to provide an effective study abroad experience. I understand it is my responsibility to contact the IUP Office of International Education and Disability Support Services if I should identify accommodation needs after I arrive on site. I further understand that at that time, the Office of International Education staff will contact the host institution and attempt to facilitate reasonable accommodations. I understand that the University cannot guarantee that accommodations I request will be feasible or available at the host institution to which I have applied.

May we refer your name and contact information to IUP students who are interested in your experience? Yes No

Signature of Student: _____

Date: _____