

## Office of Accessibility Resources

## Confidential Self-Disclosure Form

Cayuga Community College offers every student with a documented disability appropriate and reasonable accommodations in accordance with the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973. Individualized services and accommodations for students with disabilities are coordinated through the Office of Accessibility Resources.

To ensure the provision of reasonable and appropriate academic accommodations and services, students must submit documentation of their disability to the Office of Accessibility Resources. Students with disabilities are highly encouraged to provide current and complete documentation as early as possible to secure accommodations and services in a timely manner.

This confidential self-disclosure form is for **initial notification purposes only** regarding a student's disability. Reasonable accommodations and services will be determined based upon a review of the student's disability documentation, followed by a meeting with the student and the Accessibility Resources Coordinator.

## **Student Information**

Student Name: _			Date:
Preferred Name (	if not first name):		Preferred Pronouns:
Cayuga Student I	D Number:		Date of Birth:/
Mailing Address:			
City:		State:	Zip Code:
Student Phone Number: Additional Phone Number:			
Personal Email: Cayuga Email		Cayuga Email:	
Student Status:	□ Prospective student for:	□ Fall □ Spring	□ Summer Year:
	☐ Currently enrolled studen	nt	
	☐ Transfer student or currently attend another institution		
Campus Attendi	ng (select all that apply): $\Box$ A	uburn □ Fulton □ On	line

<u>Disability-Related Information</u>	
Please describe your disability:	
Please list any accommodations you are seeking:	
Do you receive assistance from ACCES-VR? □ Yes □ No	□ Not Sure
<b>Documentation of Disability</b>	
• Have you submitted documentation of your disability to our of	office? □ Yes □ No □ Not Sure
Do you have or can you obtain documentation of your disabil	lity? □ Yes □ No □ Not Sure
• Did you receive accommodations in high school (IEP or 504	Plan)? □ Yes □ No □ Not Sure
Have you utilized accommodations at another college?	☐ Yes ☐ No ☐ Not Sure
A link to Documentation Guidelines for students with disabilities car <a href="http://www.cayuga-cc.edu/cas/services/documentation-guidelines/">http://www.cayuga-cc.edu/cas/services/documentation-guidelines/</a> .	n be found at the College's website at
Student Signature	Date
Please complete and return this form to the campus you will be attended return this form to either campus. If you have any questions regarding Accessibility Resources at 315-294-8422 (Auburn) or 315-593-9327  Auburn Campus Cayuga Community College	g this form, please contact the Office of
Office of Accessibility Resources	Office of Accessibility Resources
197 Franklin Street	11 River Glen Drive
Auburn, New York 13021	Fulton, New York 13069
access@cayuga-cc.edu	access@cayuga-cc.edu
For Office Use Only:	
Form Received By: Date Received:	

Documentation Provided by Student:  $\ Y\ /\ N$  Documentation Guidelines Provided to Student:  $\ Y\ /\ N$