## Bard College Berlin A LIBERAL ARTS UNIVERSITY

## **Disability Registration Form**

Bard College Berlin is committed to providing appropriate accommodations for students with disabilities in order for them to complete their program of study. In support of this mission, the College provides services and reasonable accommodations to self-identified students who present the appropriate documentation.

In order to avail of such services and accommodations, admitted students must fill in this form and provide appropriate documentation from a licensed medical professional attesting to their disability. Documentation should be no more than three years old and must include a specific diagnosis; information about the onset, longevity, and severity of symptoms; and an explanation of how the disability and/or related medications or treatments interfere with or limit a major life activity, including participation in courses, programs, and activities of the College. This documentation should also include recommended accommodations. If this documentation is inadequate in content or scope, additional documentation may be required. The cost of obtaining documentation is the student's responsibility.

The form and the medical information will be kept on confidential record at the Diversity, Equity, and Inclusion office. The College Examination Board will consider the accommodation requested by the student. The College can only alter the form and schedule of assessment, but not the academic standards or content and learning goals embodied in the curriculum. Once the Examination Board has considered the accommodation requested, a separate Accommodation Letter will be sent to the student. The student is responsible for submitting the Accommodation Letter to faculty. Upon request, they may choose to submit the Accommodation Letter to faculty through the Diversity, Equity, and Inclusion Officer.

Name:	Date of Birth:
Email:	Tel.:
Current Address:	

1) Disability Information: State the nature of your disability.

2) List any accommodations you are requesting.

3) Documentation from a licensed professional (check one) 🛛 🗆 is enclosed 🗆 will be sent separately

Student (Name & Signature)

Date

Please return this form to: *Diversity, Equity, and Inclusion Officer, Bard College Berlin, Platanenstraße* 24, 13156 Berlin, Germany; Email: dei@berlin.bard.edu

Office use:

Date received

Date processed

Processed by