Southwest Wisconsin Technical College
Accommodation Request Form

FEDERAL LAW REQUIRES THAT ALL STUDENTS WHO APPLY TO SWTC PROGRAMS/COURSES RECEIVE THIS NOTIFICATION OF AVAILABLE ACCOMMODATIONS. IF YOU DO NOT HAVE A DISABILITY, PLEASE DISREGARD THIS FORM.

Attention: Prospective Students with Disabilities
Before a student can be accepted into a program, the Compass testing must be completed. If a student needs an accommodation, one may be provided by completing and submitting this Accommodation Request Form, along with documentation of his/her disability to the Support Services/Intake Specialist.

Attention: Prospective & Current SWTC Student
Return To: Lori Garvey, Support Services Specialist
(608) 822-3262/1-800-362-3322, Ext. 2631/ (608) 822-2631
TDD: (608) 822-2072, e-mail: lgarvey@swtc.edu

Please complete the following:

Date: __________________________ Student Name: ____________________________________________
Street Address: ________________________________________________________________
City/State/Zip: __________________ Telephone/Cell: __________________________
Email: __________________________ Program: ______________________________

High School attending/attended____________________________________________________________

School year for which accommodations are being requested:

The following list identifies some of the accommodations/services available through the Support Services Center. Please check those that you need to assist you at Southwest Tech. Please note that this is not a complete list of possible accommodations.

☐ Extended time on tests ☐ Reduced distraction testing site ☐ Tests read aloud
☐ Note-taking assistance ☐ Interpreter ☐ Enlarged print material
☐ Scribe ☐ Braille materials ☐ Adaptive computer/equipment
☐ Electronic textbook (may take up to 3 weeks or more to obtain)
☐ Other: _______________________________________________________________________

Qualified individuals are entitled to accommodations under the Americans with Disabilities Act (ADA) regulations. To access services, individuals must initiate this request in writing for specific accommodations/services. Accommodations are determined on a case-by-case basis. All information will be considered confidential and only released to appropriate personnel on a need-to-know basis. Accommodations prescribed only apply to Southwest Wisconsin Technical College and may not be valid elsewhere. The individual takes full responsibility for ongoing assistance.

Student Signature: ___________________________ Date: ___________________________

OFFICE USE ONLY

Approval Status: ☐ Yes ☐ No, please see attachment Student ID#____________________
Specialist Signature: ___________________________ Date: ___________________________