Disability Services

The School of Law and Elon University are committed to the principle of equal opportunity. One of the ways we express that commitment is in our efforts to accommodate qualified students with disabilities as they face the challenges of university life. Faculty, staff, administrators and students work together to find approaches and accommodations that enable students to benefit from the wide variety of programs and activities on campus. The School of Law will work with the University’s Academic Advising Center to arrive at the most suitable approaches and accommodations for its students. Law students and prospective law students who need more information about disability services should contact Tammy Horn, Registrar, at thorn@elon.edu or 336-279-9330.

For more information about the University’s disability services and to view a copy of the University’s Disabilities Guidebook, students may visit http://www.elon.edu/e-web/academics/advising/disabilserv.xhtml.
DISABILITY DISCLOSURE AND REQUEST FOR ACCOMMODATION  
ELON UNIVERSITY SCHOOL OF LAW

If you have a disability that will require accommodation this semester, please complete and return this form as soon as possible to Registrar. If you need additional space, please feel free to attach an additional sheet. To preserve confidentiality, please return the form in a sealed envelope. Please call (336) 279-9330 or email thorn@elon.edu if you have questions.

Students seeking an accommodation must provide a formal evaluation with a diagnosis of significant disability. For additional information, please consult the Elon University Disabilities Guidebook, available online at http://www.elon.edu/e-web/academics/advising/disabilserv.xhtml.

Semester for which Accommodation Sought: _______________________

Full Name ___________________________________________ Today’s date __________
Please print Last, First, Middle

Local Phone ________________ Cell Phone ________________ E-mail ____________________

What is your disability? Be specific (e.g., dyslexia, AD/HD, hearing, vision, epilepsy, mobility, etc.)
______________________________________________________________________________
______________________________________________________________________________

How does this disability affect your academic work, class schedule or class location?
______________________________________________________________________________
______________________________________________________________________________

What accommodations are you requesting?
______________________________________________________________________________
______________________________________________________________________________

Notes: (1) A request for accommodation form must be filled out each semester. The form can be requested from the Registrars’ Office.

(2) Requests for accommodation must be received and decided prior to any class session, activity, test, or examination potentially impacted. Because it may take time for you to provide a formal evaluation and for the administration to consider the request, requests should be made as early as possible during the semester. Accommodations are not retroactive.

(3) Information about your disability will be treated confidentially and will be shared only on a “need to know basis.” By signing below, you give us permission to share information concerning your needs with campus professionals who “need to know” (the university disabilities coordinator and that department, professors, advisors, counselors, etc.) and to prepare letters concerning appropriate accommodations to professors, advisors, counselors, etc., as necessary to provide the accommodation.

____________________________________________ Signature        Date __________________________________________

Return this form to the Registrar.