

Disability Resource Center



Please complete this application for services packet. Once completed, submit it to the Disability Resource Center (DRC) along with any **supporting documentation** that verifies your disability prior to your scheduled appointment with a DRC Counselor/Learning Disabilities Specialist. Examples of documentation include (but not limited to) an IEP or 504 from K-12, Physician, Psychiatrist, or Psycho-educational evaluation, proof of services from DMV, Social Security, Department of Rehabilitation, Department of Veterans Affairs, and/or Independent Living Center.

Personal observation by our DRC Counselor in conjunction with the student self-report, may verify the existence of a disability such as quadriplegia, paraplegia, cerebral palsy, blindness or deafness without requiring documentation. If you are unsure, contact us and we can help determine the correct course for you. Regardless, please complete the application for services packet so that we may better serve you.

Your appointment with the DRC Counselor will include the following steps:

1. Review application for services and disability documents.
2. Verify eligibility of services as a student with a disability (recommendations will be made if no documentation is available).
3. Through the interactive process, discuss educational limitations related to disability.
4. Approve Academic Accommodation Plan (AAP) and discuss policies and procedures.
5. Provide notification of accommodations for classes.
6. Make a follow-up appointment for Student Educational Plan with DRC Counselor (if not completed).

The Information you share with the Disability Resource Center is confidential and will not be part of your academic record at College of San Mateo. We look forward to meeting with you and discussing how we can support your academic success.

Disability Resource Center
Building 10, Room 120
P (650) 547-6438
F (650) 574-6434
csmdrc@smccd.edu

Disability Resource Center

Application for Services

Date: _____

Name: _____ G#: _____

Address: _____ City _____ State _____ Zip Code: _____

Phone (cell/home): _____ Email: _____

Birthdate: _____ Who referred you to DRC? _____

Emergency contact _____ Relationship _____

Have you used disability resource services at another college/university? Yes No

If yes, which college/university? _____ Dates: _____

Are you a client of any of the following organizations? (check all that apply):

☐ Department of Rehabilitation ☐ Regional Center ☐ County Mental Health

☐ Veterans Administration

- I am requesting Disability Resource Center (DRC) services. I understand that services will be determined by a DRC Counselor/Specialist upon verification of my disability and will be reviewed with me during a counseling appointment.
- I understand and agree to the **Student Rights and Responsibilities** and I will abide by them. I give permission for the Disability Resource Center staff to discuss my educational situation with other professionals who have a legitimate educational need to know. If I do not comply with these rights and responsibilities, I will be notified in writing of my impending suspension of services. I will have the opportunity to appeal the decision.

X _____

Student Signature

X _____

DRC Staff Signature

Disability Resource Center

In high school, I was in (check all that apply)

- ☐ regular classes ☐ resource program ☐ special day classes

I most closely identify with the following disability:

- ☐ Learning Disability ☐ Physical ☐ Autism Spectrum Disorder ☐ Acquired Brain Injury
☐ Deaf or Hard of Hearing ☐ ADHD ☐ Blind/Low Vision ☐ Other
☐ Intellectual Disability ☐ Mental Health

If you have a documented disability, what educational limitations do you experience because of your disability? (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> reading rate (slow reader) | <input type="checkbox"/> reading comprehension |
| <input type="checkbox"/> writing (organizing thoughts onto paper) | <input type="checkbox"/> handwriting (messy, not legible) |
| <input type="checkbox"/> math | <input type="checkbox"/> note taking |
| <input type="checkbox"/> other | <input type="checkbox"/> test taking |

Please write a brief explanation of those checked.

Are you currently taking any medication? ☐ Yes ☐ No

If yes, please list side effects that impact your education _____

Are you currently enrolled in classes at CSM? ☐ Yes ☐ No

What are your educational goals? Major _____

☐ Associate Degree ☐ Certificate ☐ Transfer ☐ Acquire job skills

☐ Personal enrichment ☐ Other _____

Are you planning on working while attending CSM? If yes, how many hours per week _____

What support services are you currently receiving at CSM?

- ☐ EOPS/CARE ☐ Financial Aid ☐ Other _____
☐ Career Center ☐ Learning Center ☐ Multicultural Center ☐ Middle College
☐ Transfer Center ☐ CalWORKs ☐ Personal Counseling & Wellness Services

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Important information for DRC students:

- It is recommended that you meet with a DRC Counselor once a semester to request academic accommodations, services, and/or auxiliary aids.
- **You must have a new accommodation letter each semester.**
- If you have an alternate media accommodation, it is advised that you request this as soon as you register for classes by visiting the DRC Assistive Technology Lab, or contacting Sue Roseberry at (650) 574-6698 or roseberrys@smccd.edu.
- Email csmdrc@smccd.edu, call (650) 574-6438, or visit the DRC's front office if you have any questions or need any assistance.

STUDENT RIGHTS AND RESPONSIBILITIES

Rights

- a) Participation in the Disability Resource Center shall be entirely voluntary.
- b) Receiving academic adjustments, auxiliary aids, services and/or instruction authorized under the subchapter shall not preclude a student from also participating in any other course, program or activity offered by the college.
- c) All records maintained by the Disability Resource Center pertaining to students with disabilities shall be protected from disclosure and shall be subject to all other requirements for handling of student records.

NOTE: Authorities cited: Title 5 C.C.C., Subchapter 6 (commencing with Section 56000). Sections 673120, 70912 and 84850, Education Code. Reference: Sections 67310-67313, and 84850, Education Code.

Responsibilities

- a) Students receiving academic adjustments, auxiliary aids, services and/or instruction under this subchapter shall:
 1. comply with the student code of conduct adopted by the college and all other applicable statutes and regulations related to student conduct;
 2. be responsible in my use of DRC services and adhere to written service provision policies adopted by DRC; and
 3. when enrolled in educational assistance classes, make measurable progress toward the goals developed for the course as established in the student's Academic Accommodation Plan (AAP) or,
 4. when the student is enrolled in general college classes, meet academic standards established by the college, as applied to all students.