



### STUDENT REQUEST FOR ACCOMMODATIONS

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First Name

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Middle Name

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Last Name

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UChicago Student ID #

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Program (College, SSA, etc.)

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Phone Number

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Email Address

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Address

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City, State, Zip Code

- 1) Please indicate your diagnosis/condition, which is the basis for your accommodation request:
  
  
  
  
  
  
  
  
  
  
- 2) Please list the accommodations you are requesting at the University of Chicago, including any on-campus housing and/or transportation needs.
  
  
  
  
  
  
  
  
  
  
- 3) Have you ever used any of the above accommodations before? If so please list the accommodations used before, and the name of the institution where they were used. If you were approved for accommodations for the SAT, ACT, or GRE, please provide a copy of the letter informing you of those accommodations.



5501 S. Ellis Avenue, Chicago, IL 60637 • 773.702.6000 • [disabilities.uchicago.edu](http://disabilities.uchicago.edu)

- 4) Do you use any assistive technology and/or software (Braille, JAWS, Kurzweil, NaturallySpeaking, etc.)? If so please list them, and indicate if you plan to bring those systems with you to the University of Chicago.
  
- 5) Please indicate if you plan to bring to the University of Chicago: a Service Animal, a Seeing Eye Cane, a Personal Assistant, wheelchair, or any other form of assistance not listed here?
  
- 6) In regards to extracurricular activities, fitness and recreation, are there any specific accommodations you would like to request?
  
- 7) Is there any other information you feel we should know in regards to considering your access concerns?

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Your Signature

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Today's Date