

Accommodation Request Form

This form is to be complete	ted by the student.	. If you need mor	e space ple	ase use	additional pa	ge or back side of form.
Date:						
Student Information:						
Full Name:		UIN: _				_
Phone Number(s):	Campus Email Address:					@tamu.edu
Preferred Email Address:						
Type of Request:	☐ *Initial	□ **Renewal-	With Chan	ges	□ **Renev	wal-No Changes
Requesting For:	\square SPRING	□ SUMMER		FALL	. 20	-
What is your major?	vices via <u>studentse</u> Station Students (e Immodations at the	Please be specification of the specification of the specific o	c and read du for info ge Station c campus. C	below) rmation (courses ty Contact (about accom opically in the College Statio	
Are you in the Corp of Mi	idshipmen? Yes _	No				
Disability Information What is your disability or						
In your own words, please	e describe your dis	sability. Please in	clude seve	rity and	functional lin	nitations.
Potential Accommoda What accommodations/ser		uesting?				
What accommodations/sed	rvices have you us	sed in the past?				
Optional Question: What academic, social, or mentoring others, being m					ing? (e.g., su	urfing, golfing, late night study group