To receive academic accommodations, a student must provide diagnostic evaluation by a license psychologist, psychiatrist or a medical provider. This documentation must meet the following criteria:

- States a specific diagnosis using the DSM IV
- Is current
  - Learning disabilities – within the last 5 years
  - ADHD/ADD – within the last 3 years
  - Psychiatric – within 6 months
}(Note that high school IEP’s are not acceptable documentation)

- For learning disabilities, provide test results, with standard scores and percentiles (including subtests), from
  a) an aptitude assessment using a complete, valid, and comprehensive battery,
  b) a complete achievement battery,
  c) an assessment of information processing, and
  d) evidence that alternative explanations were ruled out.

- For ADD/ADHD, include
  a) evidence of early impairment,
  b) evidence of current impairment, including presenting problem and diagnostic interview,
  c) evidence that alternative explanations were ruled out,
  d) results from valid, standardized, age-appropriate assessment, and
  e) number of applicable DSM-IV criteria and description of how they impair the individual.

- Describes presenting problem(s) and developmental history, including relevant educational and medical history.

- Describes the comprehensive assessments (neuropsychological or psycho-educational evaluations), including evaluation dates used to arrive at the diagnosis.

- For physical/sensory disabilities or impairments, provides results from a complete ocular, audiologic, or other appropriate medical examination

- Describes the functional limitations resulting from the disability, as supported by the test results.

- Describes specific recommended accommodations and provides a rational explaining how these specific accommodations address the functional limitations.

- Establishes the professional credentials of the evaluator, including information about licensure of certification, education, and area of specialization.

Please fax or mail all documentation to:

Disability Services for Students  Phone: 507-222-4464
One North College Street  Fax: 507-222-5038
Northfield, MN 55057
Disability Self-Disclosure Form
(Please return ONLY if you are seeking disability accommodations. Use a separate sheet if necessary.)

Name: _______________________________ Date: __________________

1. Please describe your disability. When was it first diagnosed?

2. Did you receive support services/accommodations in high school? Yes___ No___
   If yes, please describe.

3. Did you receive accommodations on SAT/ACT exams? Yes___ No___
   If yes, please describe.

4. Please describe your strengths and how you achieved success in high school.

5. Please list any limitations that you feel may hinder your success at Carleton.

6. What accommodations do you wish to request at Carleton College? Why?

7. Please list any medications that you are currently taking.

8. Carleton expects all students to fulfill all degree requirements. If you feel you should be exempted from a specific requirement, please describe why.

Please note that this form does not guarantee accommodations but will be considered along with the appropriate documentation. Please return this form along with the appropriate documentation by June 15th to:

Disability Services for Students
One North College Street
Northfield, MN 55057

Phone: 507-222-4464
Fax: 507-222-5038