## St. Thomas University Academic Enhancement Center Students with Disabilities Application form

The Academic Enhancement Center (AEC) is committed to providing equal access to all facilities, programs, and services. AEC will review each student's file under the guidelines of the American with Disabilities Act (ADA) of 1990 and Section 504 of the Rehabilitation Act of 1973. AEC reviews the documentation of each student's disability claim to avoid discrimination and protect the civil rights of the student.

Circle your intended term of entry:	Fall_		Spring Su	mmer		
	`	Year	Year	Year		
Are you a new student at STU?	Yes	No	Returning STU student?	Yes No		
Transfer student from?						
Name	STU ID					
Address						
City			State	Zip		
Home/campus phone	Cell phone					
Current employment						
	Age:					
STU email address	@stu.edu					
In case of an emergency contact						
Address						
City			State	Zip		
Home phone		Cell phone				

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State your disabi	ility:			
What are the fur	nctional limitations	of your disability?		
Medications whi	ch you are current	lly taking:		
	ing temporary or	permanent		
		iously:		
Completion of	this application w of documenta	does not ensure accor tion specific for each o	nmodations. Accomr	nodations are
Signature			Date	
<u>Confidentiality S</u> the highest confi	Statement: Docum dentiality and is mo	entation relating to studen aintained by the Office for	ts with disabilities will bo Students with Disabiliti	e regarded with es.
e du cational opportuniti 1972, the Rehabilitation	es or employment opportu Act of 1973, the American	e basis of race, sex, color, religion, nat nities and benefits, pursuant to the rec s with Disabilities Act of 1990, and otl ı require accommodations, call the O	puirements of Title IX of the Educa her applicable statutes. STU suppo	tion Amendments of rts the Americans with
		Office Use Only		
DISABILITY	SERVICES	ACCOMMODATION	AGREEMENT	AS OF
1				
2				
3				