



NORMANDALE
COMMUNITY COLLEGE

Documentation Form

To be completed by a medical professional or certified disability specialist. This student is seeking to receive academic accommodations through the Office for Students with Disabilities at Normandale Community College. In order to ensure the provision of reasonable and appropriate services, documentation must be provided by a medical provider or certified disability specialist who can verify a disability, which is defined as an impairment which substantially limits a major life activity. To facilitate the implementation of accommodations, we ask that you provide the following information:

Student's Name: _____ Date: _____

Student's Date Of Birth: _____ Student's Phone Number: _____

Student's Address: _____

Health Professional's Name & Title: _____

Clinic Name & Address (*Please stamp*): _____

Clinic Phone #: _____ Clinic Fax #: _____

Health Professional's Signature: _____

*****If available, please attach any relevant information, assessments or evaluations.**

Fax to: 952/358-8619; Email: OSD@normandale.edu or

Mail to: 9700 France Avenue South, Bloomington, MN 55431-4309

1. Impairment Assessment

- A. What is the diagnosis/impairment? _____
- _____
- B. Date of diagnosis: _____
- C. Is the impairment temporary (< 6 months) or persistent ? _____
- D. Date of last contact with student: _____
- E. Is the patient/student currently under your care? Yes No _____

Please describe the severity of the condition and this student's functional limitation in an educational setting.

Is this student taking medication? Yes No If so, are you aware of significant side effects this student has experienced that could interfere with learning in an educational environment? _____

FOR ADHD ONLY:

What procedures were used to assess/diagnose ADHD? _____

Describe developmental, medical, psychological or educational history. _____

Describe the symptoms that meet the criteria for diagnosis. _____

If this was an adult diagnosis, is there evidence of an early impairment? Yes No _____

Were other causes of inattention considered? Yes No _____