

## **Accessibility Services Online Review**

## **Personal Information**

Student Number:					
First Name:					
Last Name:					
	Course Registration & Funding				
Are you currently registered in classes for this semester?		☐ Yes	□ No		
Are you registered in 8.5 credits or less?		☐ Yes	□ No		
Have you applied for a student loan this academic year?		☐ Yes	□ No		
Do you have all of your classes scheduled at this time?		☐ Yes	□ No		
If you answered 'No					
the rest of this form	•				
Academic Strategy Support					
Would you like to us	☐ Yes	□ No			
Are you currently me	☐ Yes	□ No			
Exam Support					
Would you like Exam Supports this semester?		☐ Yes	□ No		
Would you like the same exam supports as last semester?		☐ Yes	□ No		
Would you like the s	☐ Yes	□ No			
If your exam supports are different from last semester OR from class-to-class, LIST all					
courses & labs, with the EXAM SUPPORTS you require in the space below including course					
code, followed by accommodations (Example: CAL-1124-C03: 1.5x, screen-reading)					

## **Note-Taking Support**

Would you like Note-Taking Support in any of your classes this semester?	☐ Yes	□ No		
LIST all courses & labs, in which you require NOTE-TAKING SUPPORTS in the space below including the course code (Example: ACC-1125-C03 or T90-032-C02)				
	<b>,</b>			
Other Challenges to Academic Success				
Please indicate any other accommodations you are currently receiving and would like to continue. LIST the courses and/or labs to which these accommodations apply:				

If you are having any difficulties with this form <u>OR</u> would prefer a face-to-face meeting, please contact Accessibility Services.

Accessibility Services Contact Information: Location: TE1222 (403) 320 - 3202 ext 5400 accessibilityservices@lethbridgecollege.ca