

## OFFICE OF DISABILITY SERVICES DOCUMENTATION REQUIREMENTS

The documentation, written on letterhead (not prescription pad), should be provided by an appropriate clinician and include the following elements:

- Diagnosis/diagnoses\*
- Accommodation(s) needed
- Rationale for the accommodation(s) given the diagnosis/diagnoses
- Appropriate health care provider's signature, license number, and date

## \*Please note:

- If diagnosis is **Learning Disability, Attention Deficit Hyperactivity Disorder (ADHD),** or an **Autistic Spectrum Disorder** (ASD, including Asperger's Disorder), please submit psychoeducational evaluation and, if available, Individual Educational Plan (IEP).
- If diagnosis is related to a **psychological/psychiatric**, DSM or ICD format should be provided.
- If diagnosis is for a **temporary** condition, provider must indicate a time frame for accommodations.
- If **multiple diagnoses** are to be considered for accommodations, documentation must meet the requirements for each diagnosis.

## Please submit documentation via email or fax to:

(By email, please provide a Word doc or PDF attachment only. Photo files, such as jpeg, are not acceptable.)

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