

SFA Commencement Accommodations Request Form

The information requested below is for the purpose of providing reasonable accommodations for students with documented disabilities during commencement ceremonies. Accommodations are determined on a case-by-case basis and all information about your disability will be regarded as confidential. If necessary, the Registrar's Office may consult with Disability Services concerning the provision of reasonable accommodations. We request that you meet with a Registrar's Office representative at the Johnson coliseum prior to the commencement ceremony to review and confirm your requested accommodations.

Please answer the following questions:

What is the nature of your functional limitation? _____

Is your disability documented within Disability Services? Yes No

**If your disability is not documented within Disability Services,
you must provide supporting documentation from your physician with this form.**

Indicate below the specific accommodations you are requesting:

____ Sign Language Interpreter
____ Interpreter on stage
____ Interpreter nearby (at rows end)

____ Electronic Commencement Program

____ Mobility Assistance

____ I cannot maneuver stairs and would like someone to walk in my place until they reach the coliseum floor.

____ I cannot maneuver stairs and would like someone to walk in my place, walk with me to my seat and to the stage.

____ I cannot maneuver stairs and would like someone to walk in my place, walk with me to my seat, to the stage, and assist me across the stage.

____ Preferential Seating

____ At the end of row.

____ Behind the stage.

____ Behind the stage with someone to assist me across the stage.

Describe any additional, reasonable assistance that you will need during Commencement (Please be specific): _____

Printed Name:	Telephone No.:
Student ID:	Graduation Semester: May <input type="checkbox"/> August <input type="checkbox"/> December <input type="checkbox"/> Year:
Please indicate your time/day preference for meeting with a Registrar's Office representative at the Johnson Coliseum:	<input type="checkbox"/> Thursday prior to Commencement @ 2 PM <input type="checkbox"/> Friday prior to Commencement @ 10 AM
Signature:	Please provide this completed and signed form to the Registrar's Office representative during your scheduled meeting at the coliseum.

FOR OFFICE USE ONLY: 1. Were you satisfactorily accommodated? Y N

FOR OFFICE USE ONLY: 2. Did the accommodations meet your expectations? Y N