Disability Support Services

Handbook for Students with Disabilities

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**Introduction:** Middlesex Community College is committed to the full participation of all students in its programs. Students with disabilities who need academic adjustments or auxiliary aids are encouraged to contact the Disability Support Services Office in Founders Hall room 121.

This handbook will outline the procedures by which students with disabilities can access support services at Middlesex Community College.

**The Disability Support Services Office**

**Mission Statement and Program Objectives**

The mission of the Disability Support Services Office is to provide services and supports that promote equal access in accordance with the Americans with Disabilities Act of 1990 (ADA) and Section 504 of the Rehabilitation Act of 1973. This is accomplished through the provision of academic adjustments, auxiliary aids and support services that are in compliance with Federal and State statutes.

Upon request, the Disability Support Services coordinator will assist students in the following:

- Identifying appropriate academic adjustments and auxiliary aids and services.
- Developing strategies to negotiate college life.
- Increasing the individual’s self-advocacy skills.
- Communicating academic adjustments of student to faculty and staff.
- Identifying a student’s personal strengths and weaknesses.
- Assisting a student in development of compensatory skills.
- Understanding legal rights and protections and the effective use of them.
- Seeking out career development resources both on and off campus.

**Confidentiality**

Maintaining the confidentiality of students registered with the Disability Support Services Office is of paramount importance. All documentation, student consent and academic adjustment forms remain secure in the DSS Office. Information pertaining to the specific nature of a student’s disability is not shared with other departments within the college. The DSS Office intends to support the student while respecting his/her right to privacy. The DSS Office at MxCC complies with FERPA and HIPPA guidelines and only releases information contained in student records as allowed by law.
Board Policy On People with Disabilities

Board of Trustees of
Community-Technical Colleges
61 Woodland Street
Hartford, Connecticut 06105
[updated December, 2011]

2.1.6 People with Disabilities: Policy Statement

People with Disabilities in the Community Colleges
The Board of Trustees of Community-Technical Colleges and all of the colleges under its jurisdiction are committed to the goal of achieving equal educational opportunity and full participation for people with disabilities in the Community Colleges. To that end, this statement of policy is put forth to reaffirm our commitment to ensure that no qualified person be excluded from participation in, be denied the benefits of, or otherwise be subjected to discrimination under any program or activity on a Community College campus or in the system office of the Board of Trustees.

The board recognizes that a physical or functional impairment is a disability only to the extent that it contributes to cutting the person off from some valued experience, activity, or role. Higher education is therefore especially important to people with disabilities, since it aims to increase every student's access to valued experiences, activities, and roles. Improving access for students and employees means removing existing barriers that are physical, programmatic, and attitudinal; it also means taking care not to erect new barriers along the way.

The efforts of the Community Colleges to accommodate people with disabilities should be measured against the goals of full participation and integration. Services and programs best promote full participation and integration of people with disabilities when they complement and support, but do not duplicate, the regular services and programs of the college.

Achieving the goal of full participation and integration of people with disabilities requires cooperative efforts within and among higher education. The Board will work to achieve a higher level of services and appropriate delivery methods at all Connecticut Community Colleges.

This statement is intended to reaffirm the board's commitment to affirmative action and equal opportunity for all people and in no way to replace the equal opportunity policy statement.
(Adopted November 20, 1989)

Students New to Disability Services:

1. New students who believe they are eligible for academic adjustments at MxCC should schedule an appointment with the Disability Support Services Office as soon as possible.
2. During that meeting submit appropriate documentation of your disability to the DSS Office.
3. Complete an intake interview with the DSS Office to discuss strengths, learning styles and possible academic adjustments.
4. Complete the Academic Adjustment Form with the Disability Support Services Office.
5. Review the procedures for arranging for approved adjustment.

Why do I need to visit the Disability Support Services Office?

Unlike in K-12 education where the responsibility for determining eligibility falls on the school system, in higher education the responsibility is on the student with a disability to self-disclose and request adjustments. The process of identifying and obtaining an academic adjustment in college is an interactive one. Students with disabilities may or may not disclose; however a student who chooses not to disclose is not eligible to receive academic adjustments. Nor can a student disclose his/her disability and receive retroactive adjustments. The Disability Support Services Office cannot grant retroactive adjustments.

What is appropriate documentation?

The student has the responsibility of providing the college with appropriate Medical, Psychological, Psycho-education, or Neuropsychological documentation from a qualified Psychologist, Physician or Clinician who has diagnosed his/her disability.

Documentation must be current, in most cases within three years, and indicate the student’s disability, functional limitations, the impact of the disability in the academic environment and any recommended or suggested academic adjustments. All information submitted to the DSS Office becomes part of a confidential file and is used to support the appropriateness of requested adjustments.

Please note, an Individualized Education Plan (IEP) or a 504 Plan does not in and of itself comprise appropriate documentation, although in conjunction with other documentation can substantiate eligibility for academic adjustments. Students who have a history of using a 504 Plan for medical reasons must submit additional appropriate medical documentation of a disability.

Middlesex Community College follows the guidelines established by The Americans with Disabilities Amendments Act 2008 (ADAAA) http://www.eeoc.gov/laws/statutes/adaaa_info.cfm and the Association of Higher Education and Disability http://www.ahead.org/resources/documentation_guidance/FAQ

For your reference below are the elements necessary for appropriate documentation. The DSS Office at MxCC follows the AHEAD best practices in disability documentation in higher education.
1. The credentials of the evaluator(s).

2. A diagnostic statement identifying the disability.

3. A description of the diagnostic methodology used.


5. A description of the expected progression or stability of the disability.

6. A description of current and past accommodations, services and/or medications.

7. Recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or collateral support services.

It is the responsibility of a student who wishes to receive academic adjustments at the postsecondary level to provide comprehensive and current documentation that meets the appropriate elements noted above. Additionally, information that is specific to the condition should be provided. Specific information is as follows:

**Acquired Brain Injury**
Students requesting academic adjustments on the basis of an Acquired Brain Injury (ABI) also called Traumatic Brain Injury (TBI) must provide documentation (in most cases within two years) from a professional who has undergone comprehensive training and has relevant experience in the assessment of ABI/TBI in adolescents and/or adults (e.g. Neuropsychologists, Clinical or Educational Psychologists). The ADA Amendments of 2008 which expand major life activities to include thinking and concentrating, enhance the likelihood that students diagnosed with this disorder will be eligible for consideration of academic adjustments. Students requesting academic adjustments on the basis of an ABI/TBI must submit documentation, including but not be limited to:

1. A Neuropsychological evaluation containing assessments of intellectual, conceptual and cognitive competence; academic skills; personality status; motor facility of all extremities; sensory, perceptual and processing efficiency; visual, auditory and tactile facility; speech, language and communication ability; and evaluation of memory and attention.

2. Utilization of particular evaluation techniques at the discretion of the evaluator possibly including; Bender-Gestalt, Halstead Reitain Battery (or selected parts); Detroit Tests of Learning Aptitude - 4 (DTLA-4) or Detroit Tests of Learning Aptitude - Adult (DTLA-A); Luria Nebraska Battery (or selected parts); Peabody Individual Achievement Test-R/NU (or other adult individual achievement tests); Woodcock Reading Mastery Tests- Revised/NU; Woodcock-Johnson III; and the Spache Written Language Assessment.

3. An interview including a description of the presenting problem(s); developmental, medical, psychosocial and employment histories; family history (including primary language of the home and the student's current level of English fluency); and a discussion of dual diagnosis where indicated.
4. An integrated summary that:

- Indicates executive functioning deficits expected to impact postsecondary education performance and appropriate adjustments;
- Describes the impact of the limitations specifically on learning (e.g., reading, math, and written expression);
- Identifies concerns with negotiation of the college environment and suggests strategies; and
- States how the effects of the brain injury are mediated by the recommended adjustments.

**Autism Spectrum Disorder/Asperger Syndrome**

Students requesting academic adjustments on the basis of Autism Spectrum Disorder (ASD) must provide documentation from an appropriately credentialed professional who has undergone comprehensive training and has at least 5 years of experience diagnosing ASD in children, adolescents or young adults (depending on age of student). The ADA Amendments of 2008 which expand major life activities to include “communicating” will likely render more students diagnosed with this disorder eligible for consideration for academic adjustments. The preferred form of documentation is in the form of a comprehensive Neuropsychological evaluation accompanied by a clinical statement reviewing history and current symptoms. Comprehensive diagnostic evaluations should include, but not be limited to, the following:

- Thorough medical, family, and developmental history gathered by appropriate professional (Developmental Pediatrician, Neurologist, Psychiatrist, Psychologist, Neuropsychologists, etc.).
- Comprehensive Psychological or Neuropsychological examination, within the past three years, including a detailed discussion of the individual’s current cognitive functioning as it impacts the educational environment.
- Academic testing – standardized achievement tests, including standard scores;
- Current level of social/emotional functioning by separate evaluator if not contained in the neuropsychological evaluation.
- Integrated narrative summary, including impact of symptoms on learning and/or communicating, ability to function in a college community and executive functioning deficits as relevant to postsecondary education.
- Clear identification of symptoms as they pertain to Diagnostic and Statistical Manual IV (DSM-IV) criteria for all relevant diagnoses.
- A clinical interview including a description of the presenting problem(s) including any significant developmental, medical, psychosocial and employment; family history; and a discussion of co-morbid diagnoses (if relevant). A comprehensive interview with parents or knowledgeable informants and a self-report is needed to obtain a view of the individual’s present function and ability.
- Prescribed medications, dosages and schedules which may influence the learning environment, including any possible side effects.
- Supplemental documentation may include evaluations by allied health professionals such as speech/language assessments, occupational therapy records, statements from therapist or other treating professionals.

**Attention Deficit Hyperactivity Disorder**

Students requesting academic adjustments on the basis of Attention Deficit Hyperactivity
Disorder (ADHD) must provide documentation by a professional who has undergone comprehensive training and has relevant experience in differential diagnosis and the full range of psychiatric disorders (e.g., Psychologists, Psychiatrists, Neuropsychologists and other relevantly trained Medical Doctors). The ADA Amendments of 2008 which expand major life activities to include “concentrating” will likely render more students diagnosed with this disorder eligible for consideration of academic adjustments. Documentation for students requesting academic adjustments on the basis of ADHD must include but not be limited to:

1. Evidence of early impairment. The condition must have been exhibited in childhood in more than one setting.
2. Evidence of current impairment. A history of the individual's presenting attentional symptoms and evidence of current impulsive/hyperactive or inattentive behaviors that significantly impair functioning in two or more settings must be provided. History of full assessment with current symptoms for past six months.
3. An interview. The interview must contain self-report and third-party information pertaining to: any significant developmental history; family history of ADHD or other educational, learning, physical or psychological difficulties; relevant medical and medication history; a thorough academic history; and a review of prior Psycho-educational test reports to determine whether a pattern of strengths or weaknesses is supportive of attention or learning problems.
4. Descriptions of current functional limitations pertaining to an educational setting that are presumably a direct result of problems with attention.
5. A discussion of the Neuropsychological or Psycho-educational assessments administered to determine the current impact of the disorder on the individual's ability to function in an academic setting. Such data should include standard scores, standard deviations and percentiles reported in table format for those subtests administered.
6. An indication of whether or not the student was evaluated while on medication, and whether or not the prescribed treatment produced a positive response.
7. Prescribed medications, dosages and schedules that may influence the types of accommodations provided, including any possible side effects.
8. An integrated summary that:
   - indicates the substantial limitations to major life activities posed by the disability,
   - describes the extent to which these limitations would impact the academic context for which accommodations are being requested,
   - suggests how the specific effects of the disability may be accommodated, and
   - states how the effects of ADHD are mediated by the recommended accommodations.

**Blindness or Low Vision**

Documentation for students requesting academic adjustments on the basis of low vision or blindness must include but not be limited to:

1. An ocular assessment or evaluation from an Ophthalmologist.
2. A low-vision evaluation of residual visual function, when appropriate.
3. Suggestions as to how the functionally limiting manifestations of the disabling condition(s) may be accommodated.

**Deaf/Hard of Hearing**

Documentation for students requesting academic adjustments on the basis of being deaf or hard of hearing must include but not be limited to:
1. An audiological evaluation and/or Audiogram administered by an Otorhinolaryngologist, Otologist, or licensed Audiologist.
2. An interpretation of the functional implications of the diagnostic data and hearing aid evaluation, where appropriate.
3. Suggestions on how the functionally limiting manifestations of the disabling condition(s) may be accommodated. If the audiological report does not include recommendations for accommodations, an Audiologist should be consulted – an Educational Audiologist is preferable.
4. The age of acceptable documentation is dependent upon whether the disabling condition is static or changing.

**Intellectual Disabilities**

Students requesting academic adjustments on the basis of an intellectual disability must provide documentation from a professional who has comprehensive training and relevant experience in the assessment of intellectual disability in adolescents and/or adults (e.g., Clinical or Educational Psychologists, School Psychologists, Neuropsychologists, Special Education Teachers). At the secondary level, eligibility for services under the category of ID may be determined by a multidisciplinary team and therefore include reports completed by special and general education teachers. It should be noted that students with intellectual disability who may have received modifications to essential course requirements in their secondary program may not be eligible for similar modifications in the postsecondary setting. Postsecondary institutions are not required to modify the essential course requirements and expectations as a reasonable accommodation for students with disabilities.

Documentation for students requesting accommodations on the basis of Intellectual Disability must include, but is not limited to:

1. An interview including a description of the presenting problem(s); any significant developmental, medical, psychosocial and employment histories; family history (including primary language of the home and the student's current level of English fluency); and a discussion of dual diagnosis where indicated.
2. A complete assessment of intellectual functioning/aptitude as measured by the Wechsler Adult Intelligence Scale-III (WAIS-III) with standard and scaled scores, including subtest scores. The Woodcock-Johnson Psycho-educational Battery-Revised: Tests of Cognitive Ability or the Stanford-Binet Intelligence Scale: Fourth Edition are also acceptable.
3. A comprehensive academic achievement battery that measures current levels of functioning in reading (decoding and comprehension), mathematics and oral and written language (e.g., Woodcock-Johnson Psycho-educational Battery - Revised: Tests of Achievement, Wechsler Individual Achievement Test (WIAT), Stanford Test of Academic Skills (TASK), Scholastic Abilities Test for Adults (SATA), or specific achievement tests - Test of Written Language-3 (TOWL-3), Woodcock Reading Mastery Tests-Revised, Stanford Diagnostic Mathematics Test). All standard scores, standard deviations and percentiles must be reported for those subtests administered.
4. Measures of functional performance across all domains, (e.g. English Language Arts, Mathematics, Behavioral/Social/Emotional, Communication, Vocational/Transition, Health and Development including Vision and Hearing, Fine and Gross Motor, and Activities of Daily Living) may be helpful in presenting a holistic view of the student. A comprehensive SOP (Summary of Performance) and a student portfolio may contain critical information pertaining to the student’s:
   - Strengths, needs, preferences and interests
• Need for accommodations and the use of assistive technology
• History of employment, volunteer and community work experiences
• Ability to function in the college environment.
• Learning style, specifically in the areas of reading, mathematics and written and oral expression

5. A specific diagnosis of intellectual disability.
6. Terms such as individual "learning styles," "learning differences," "academic problems," and "slow learner" and "test difficulty or anxiety," in and of themselves, do not constitute an adequate diagnosis of intellectual disability. It is important for the evaluator to demonstrate that alternative explanations for academic problems as a result of poor education, poor motivation and/or study skills, emotional problems, attention problems and cultural/language issues that may be interfering with learning, but that do not constitute intellectual disability, have been ruled out.
7. An indication of how patterns in the student's cognitive ability, achievement and information processing reflect the presence of intellectual disability.
8. An integrated summary which:
   • indicates the substantial limitations to major life activities posed by the intellectual disability,
   • describes the extent to which these limitations impact the academic context for which academic adjustments are being requested,
   • suggests how the specific effects of the intellectual disability may be accommodated, and
   • states how the effects of the intellectual disability are mediated by the recommended academic adjustments.

Learning Disabilities
Students requesting academic adjustments on the basis of a specific learning disability must provide documentation from a professional who has undergone comprehensive training and has relevant experience with conducting psycho-educational assessments with adolescents or adults (e.g., Clinical or Educational Psychologists, School Psychologists, Neuropsychologists, Learning Disabilities Specialists). At the secondary level, eligibility for services under the category of LD may be determined by a multidisciplinary team and therefore include reports completed by special education teachers. The Americans with Disabilities Act Amendments of 2008 expand the definition of major life activities to include “reading.” Accordingly, an evaluator might wish to analyze a student’s assessment results not just in terms of “learning” but in “reading” as well. Documentation for students requesting academic adjustments on the basis of a learning disability must include, but is not limited to:

1. Pertinent background information, including a description of the presenting problem(s); any significant developmental, medical, psychosocial and employment histories; family history (including primary language of the home and the student's current level of English fluency); and a discussion of co-morbidity where indicated.
2. A complete assessment of intellectual functioning/aptitude, preferably, but not limited to the Wechsler Adult Intelligence Scale-III (WAIS-III) with standard and scaled scores, including subtest scores. The Woodcock-Johnson III: Tests of Cognitive Ability or the Stanford-Binet Intelligence Scale: Fifth Edition is also acceptable.
3. A comprehensive academic achievement battery that measures current levels of functioning in reading (decoding and comprehension), mathematics and oral and written language (e.g., Woodcock-Johnson III: Tests of Achievement, Wechsler Individual Achievement Test II (WIAT II), Stanford Test of Academic Skills (TASK), Scholastic Abilities Test for Adults (SATA), or specific achievement tests - Test of Written Language-3 (TOWL-3), Woodcock Reading Mastery
Tests-Revised/NU, Stanford Diagnostic Mathematics Test, Nelson-Denny). All standard scores, standard deviations and percentiles must be reported for those subtests administered.

4. An assessment of specific areas of information processing (e.g., short- and long-term memory, sequential memory, sequential and simultaneous processing, auditory and visual perception/processing, processing speed, working memory, motor ability). Information from subtests on the WAIS-III, the WJIII Tests of Cognitive Ability, or the Detroit Tests of Learning Aptitude - Adult (DTLA-A), as well as other instruments relevant to the presenting learning problem(s) may be used to address these areas.

5. Other assessment measures such as non-standard measures and informal assessment procedures or observations may be helpful in determining performance across a variety of domains. Formal assessment instruments may be integrated with these types of measures to help determine a learning disability and differentiate it from co-existing neurological and/or psychiatric disorders (i.e., to establish a differential diagnosis). In addition to standardized tests, it is also very useful to include informal observations of the student during the test administration.

6. A diagnosis of a specific learning disability. Individual "learning styles," "learning differences," "academic problems," and "test difficulty or anxiety," in and of themselves, do not constitute a learning disability. It is important for the evaluator to demonstrate that alternative explanations for academic problems as a result of poor education, poor motivation and/or study skills, emotional problems, attentional problems and cultural/language issues that may be interfering with learning but do not constitute a learning disability have been ruled out.

7. An indication of how patterns in the student's cognitive ability, achievement and information processing indicate the presence of a learning disability.

8. An integrated summary that:
   - indicates the substantial limitations to major life activities (e.g., learning, reading, thinking) posed by the specified learning disability;
   - describes the extent to which these limitations impact the academic context for which accommodations are being requested;
   - suggests how the specific effects of the learning disability may be accommodated; and
   - states how the effects of the learning disability are mediated by the recommended accommodations.

Physical Mobility, Dexterity, and Chronic Health-Related

The Americans with Disabilities Amendments Act (ADAAA) of 2008 expand the definition of major life activities to include the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions. Pertinent here are new additional major life activities such as thinking, eating, sleeping and concentrating which may be substantially limited by these conditions. Documentation for students requesting academic adjustments on the basis of physical mobility, dexterity, or chronic health-related disabilities must include:

1. An identification of the disabling condition(s).
2. An assessment of the functionally limiting manifestations of the condition(s) for which accommodations are being requested.
3. Degree and range of functioning for a chronic or progressive condition.
4. Prescribed medications, dosages and schedules that may influence the types of accommodations provided, including any possible side effects.
5. Suggestions as to how the functionally limiting manifestations of the disabling condition(s) may be accommodated.

**Psychiatric Disorders**

Students requesting academic adjustments on the basis of a psychiatric disorder must provide documentation from a professional who has undergone comprehensive training and has relevant experience in differential diagnosis and the full range of psychiatric disorders (e.g., Licensed Clinical Psychologists, Psychiatrists, Psychiatric Advanced Practice Registered Nurse (APRN) Licensed Clinical Social Workers, and other relevantly trained Medical Doctors). The Americans with Disabilities Act Amendments of 2008 expand the definition of major life activities to include thinking, sleeping, concentrating, eating, stooping, bending, standing and communicating which will likely result in the identification of more students with these types of disorders. The Act does not cover conditions that are likely to resolve in six months or less. However, the Act includes conditions that are cyclical in nature and the disability determination should be made based on consideration of when the condition is active. Documentation for students requesting accommodations on the basis of a psychiatric disorder must include:

1. A recent evaluation or updated assessment, preferably within the past six months – due to the changing nature of Psychiatric Disorders.
2. An interview including a description of the presenting problem(s) including any significant developmental, medical, psychosocial and employment; family history; and a discussion of dual diagnosis where indicated.
3. A specific, current psychiatric diagnosis as per the DSM-IV of the American Psychiatric Association (2000), which indicates the nature, frequency and severity of the symptoms upon which the diagnosis was predicated. A diagnosis without an explicit listing of current symptoms is not sufficient. Emotional Disturbance (ED) is an educational label and does not alone constitute a disability at the postsecondary level.
4. Primary and secondary Axis I and Axis II diagnoses. A measure of functioning using the Global Assessment of Functioning (GAF) Scale in the DSM-IV is highly recommended. Using the GAF, indicate the student's general, highest and lowest GAF score and describe behaviorally the student's performance at each GAF level using as much detail as is known.
5. Prescribed medications, dosages and schedules that may influence the learning environment and types of accommodations, including any possible side effects.
6. An indication of whether or not the student was evaluated while on medication, and whether or not the prescribed treatment produced a positive response.
7. An integrated summary that:
   - indicates the substantial limitations to major life activities posed by the psychiatric disability,
   - describes the extent to which these limitations would impact the academic context for which accommodations are being requested,
   - suggests how the specific effects of the psychiatric disorder may be accommodated, and
   - states how the effects of the psychiatric disorder are mediated by the recommended accommodations.

**Are all requests for academic adjustments approved?**

The Americans with Disabilities Act (1990) and the Americans with Disabilities Amendments Act (2008) requires consideration of requested academic adjustments; it does not imply that a
particular adjustment must be granted if it alters an academic or technical standard or the course or program. Additionally, academic adjustments will be provided for a disability only when the disability impacts the student academic performance.

**Academic Adjustments**

Because many requests for assistance involve access to information, space (classroom accessibility) and adaptive technology/devices, these needs are outlined on a semester basis and are communicated with all faculty a student is working with. Communication of approved adjustments does not mean a student must access the adjustment, the choice is the student’s. Examples of academic adjustments include:

- Adaptive technology and software
- Alternative formats of textbooks
- Audiotaping accommodations
- Computer use for in class writing
- Copies of notes
- Enlarged print materials
- Extended time for exams
- Flexible attendance policy
- FM systems
- Isolated test area
- Requests for accessible table/chair
- Sign language interpreters
- Scribe/reader for exams
- Wheelchair accessibility

The timeliness of the request is critical to enable the College to make necessary adjustments and/or obtain required services. All efforts to comply with student requests for auxiliary aids, services and adaptive devices will be documented and maintained in the student’s confidential file.

**How to request Academic Adjustments**

- Each semester, the student needs to schedule an appointment with the Disability Support Services Coordinator to discuss academic schedule and classes needing adjustments. Ideally this appointment will happen prior to the start of class. Certain adjustments require consultation with outside agencies and departments within MxCC and lack of foresight on the students part will delay the implementation of these services—for example sign language interpreters must initially go through the Commission for Deaf and Hard of Hearing. The Commission often receives requests two months or more before needed services.
• Students presenting during the first few days of class will be asked to schedule an appointment and may experience a delay in receiving adjustments.

• During this meeting provide a copy of your semester course schedule and discuss prior semester adjustments (if applicable) to assess their success and if necessary discuss any new requirements for adjustments. Please note that requests for additional adjustments need to be supported by additional documentation.

• Present your Academic Adjustment form to each faculty for his/her signature

• Return the signed form to the DSS office. You will receive a copy of the signed document for your records.

Sign Language Interpreters

• Student completes the Semester Academic Adjustment Form and submits that with a copy of his/her course schedule to the Disability Support Services Office at least one month prior to the start of the semester. Interpreter requests are dependent on availability and adequate lead time is crucial

• Requests are submitted to the Connecticut Commission of Deaf and Hearing Impaired and interpreters are contracted through that office. If the Commission cannot meet MxCC’s needs additional community agencies will be contacted

• Please contact the DSS Office with any schedule changes as soon as possible

• It is the student’s responsibility to contact both the DSS Office and the Commission as soon as possible if you will not be attending class due to illness, etc.
Copies of Notes (Volunteer notetaker)

- When a student is approved for a volunteer notetaker the faculty teaching the class will be contacted and a request will be made to the class.
- Students who wish to remain anonymous can do so by requesting that notes be scanned and emailed to the DSS Office or duplicated in the DSS Office for student pick up.
- It is the student’s responsibility to contact the DSS Office if there are questions or concerns about the notes or if they are no longer needed.
- Copies of notes are not replacements for taking your own notes. All students should continue to take notes even if receiving volunteer notetaker services.

Alternate format of materials—students needing an alternative version of a text such as electronic format or braille should observe the following procedures.

- Complete the intake process and be approved for alternative format of materials as an academic adjustment.
- Complete Semester Academic Adjustment Form and an Alternate Format Request and submit to the DSS Office at least six weeks prior to the date needed.
- Once submitted the DSS office will order the book(s) in an alternate format from the Learning Ally or from the publisher. Students are required to purchase their own textbook before the alternate formatting process can take place.

Table

- Students requiring an accessible table must complete a Semester Academic Adjustment form and submit to the DSS Office at least two weeks prior to the start of the semester.
- The DSS Office will ensure the accessible table is available in each classroom needed.

Academic Testing Adjustments

- Students who need to take exams in the DSS Office must obtain and complete an Exam Cover Sheet for each exam and schedule their exam time with the DSS Office.
- It is up to the student to have the instructor fill out his/her portion of the form and indicate the method of exam delivery to the DSS Office (mailbox, in person, email) and the method of return (mailbox, sealed envelope brought to the classroom, scan and email) and return the form to the DSS Office
- Arrive on time for your exam with all approved materials
- For online exams be sure to schedule one of the computers.

Services not provided by Middlesex Community College:
• Specialized tutoring for students with disabilities
• Specialized classes for students with disabilities
• Learning disabilities evaluation and testing.
• Classroom aids/personal care attendants.

Grievance Procedure

Students with disabilities who believe that they are not receiving the services they are due by law should address their concerns first with the Disability Support Services Coordinator, Hilary Phelps (hphelps@mxcc.edu or 860 343-5879). If the issue is not satisfactorily resolved they should contact the Dean of Students and ADA/504 Coordinator, Adrienne Maslin (amaslin@mxcc.edu or 860 343-5759).

Contact Information

Please contact Hilary Phelps, Disability Support Services Coordinator, if you have any questions regarding Disability Support Services.

Hilary Phelps
Disability Support Services Coordinator
860 343-5879
hphelps@mxcc.edu