**BEVILL STATE COMMUNITY COLLEGE DISABILITY SERVICES**

**504/ADA Accommodations Request Process for Persons with Disabilities**

* **Disclosure of a disability is voluntary**.

* The accommodations request process begins when a student contacts the campus 504/ADA coordinator. The campus coordinators are the individuals authorized to assist students and the community with individual accommodations.

Fayette Campus and Pickens County Educational Center, Andria Carlisle, extension 5137

 Hamilton Campus, Gail Wooldridge, extension 5372

 Jasper Campus, Hannah Tingle, extension 5901

Sumiton Campus, Jana Kennedy, extension 5201

College-wide, Jill Preuninger, extension 5385

* All students who take the College placement exam are invited to request information for students with disabilities on their test answer sheets. Students who request information

are given the name of the campus 504/ADA coordinator and an ADA Fact Sheet/Accommodations Request Form, and are invited to contact the 504/ADA coordinator for additional information.

* The student and the 504/ADA coordinator work together to determine the student’s campus-related accommodation needs. A good faith effort is made to provide appropriate accommodations and to fully comply with both the letter and the spirit of Section 504 and ADA guidelines.

* An **Accommodations Request Form** must be completed identifying accommodations requested and other pertinent information. Forms are available from the 504/ADA coordinator, the placement test center, the Office of Student Services, online at www.bscc.edu, and the *Orientation Workbook*.

* **Documentation of disability may be required**. Information release forms are available from the 504/ADA coordinator to assist the student in obtaining official documentation of disability from physicians or other agencies.

* Once a student meets with the 504/ADA coordinator to request classroom accommodations and provides any needed documentation of disability, the coordinator sends a Documentation of Disability Form to each of the student’s instructors to inform them of the accommodations to be met in the classroom.

* **The student then meets with each instructor to request and to discuss the implementation of each authorized accommodation. Instructors will not initiate accommodations without the student’s consent.**

* The student must meet with the 504/ADA coordinator **at the beginning of each academic term** for which classroom accommodations are requested, so that the instructors for each term can be notified of the accommodations.

* **Non-classroom accommodation** requests are forwarded by the 504/ADA coordinator to the appropriate College official for implementation.
* Completed Accommodation Request Forms and any documentation of disability are confidential and are stored in a **locked file** separate from the student’s permanent student record.

**Bevill State Community College Disability Services**

**504/ADA Fact Sheet and Accommodations Request Form**

Bevill State Community College, whose mission is to provide the citizens of the west-central Alabama area with educational opportunities that enrich their lives intellectually, culturally, and economically, fully supports and seeks to comply fully with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990. We strive to create a welcoming environment for all and will work in good faith to meet the needs of persons with special needs. We endeavor to provide opportunities for success, with as few deterrents as possible to students, employees, and citizens of the communities we serve.

The following procedures are in place to assist anyone with needs for accommodation:

Students and citizens are encouraged to contact their respective campus 504/ADA coordinator, if assistance is desired, to discuss classroom or any other accommodation needs. Completing and submitting the form below to the campus 504/ADA coordinator begins the accommodations request process, and allows the coordinator to make requests on the student’s or citizen’s behalf. Disclosure of disability is voluntary. Campus 504/ADA coordinators are:

Fayette Campus and Pickens County Educational Center, Andria Carlisle, extension 5137

 Hamilton Campus, Gail Wooldridge, extension 5372

 Jasper Campus, Hannah Tingle, extension 5901

Sumiton Campus, Jana Kennedy, extension 5201

College-wide, Jill Preuninger, extension 5385

Documentation of disability may be required. If so, such documentation will be maintained in a confidential file separate from the academic student record.

**STUDENT AND CITIZEN ACCOMMODATION REQUEST FORM**

NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SSN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BSCC STUDENTS: Program/major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ADVISOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITIZENS: Event/service and date for which accommodation is needed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ALABAMA REHABILITATION COUNSELOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT PERSON\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NATURE OF DISABILITY (Disclosure of disability is voluntary.)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACCOMMODATIONS (S) REQUESTED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STAFF SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It is the policy of the Alabama Community College System, its Board of Trustees and Bevill State Community College, an institution under its control, that no person shall, on the grounds of race, color, disability, sex, religion, creed, national origin, or age, be excluded from participation in, be denied the benefit of, or be subjected to discrimination under any program, activity, or employment. OSS7/19