Student Questionnaire

Student Name: __________________________

1. Please identify your disability and describe how you experience your disability.
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   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

2. Have you previously received accommodations either at work or school? If so, what were they and how did they help or not help?
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   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
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3. What barriers have you experienced or do you anticipate experiencing in your classes or on campus?
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4. Have you ever been in classes where accommodations were unnecessary due to the way the course was designed? Describe the design of those courses.
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   _______________________________________________________________________
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5. There are a variety of resources on and off campus that student’s utilize to increase their academic success. Examples include family, friends, psychologists, academic resource centers, individual tutors, etc. What are some of the resources available to you that you plan on accessing in college?
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   _______________________________________________________________________