



Student Responsibilities Contract

As a student receiving accommodations, I am aware that I have the following responsibilities in order to be eligible to receive appropriate services for my disability.

- I will provide necessary documentation of my diagnosed disability, including information regarding the impact of the disability and recommended accommodations.
- I understand that information provided to Disability Services is considered private and will be used for the purposes of establishing protection under the law, determining appropriate accommodations, and ensuring the effective implementation of those accommodations. All provided information will be protected against misuse by others.
- I will meet with the Disability Services to determine the accommodations I am eligible to receive while at Johnson College.
- I understand that to be eligible to receive any accommodations that require special approval and/or coordination, I must turn in a written request within the required timeframe. I will discuss all requests with the Manager of Disability Services prior to the beginning of the semester to determine the appropriate timeframe.
- I am responsible for scheduling necessary appointments with Disability Services, instructors, advisors, tutors, and others who may be assisting me.
- I am responsible for completing ALL requirements for the course(s) in which I am registered.
- I will take responsibility for learning and using the various services provided by Johnson College.
- I understand that if I have a concern about my accommodations, it is my responsibility to contact and schedule a meeting with Disability Services.

This contract will be in effect as long as I am a registered student at Johnson College unless I provide a written, signed letter canceling it. I understand that canceling will result in termination of eligibility to receive services.

Student Signature _____

Date _____

Disability Services Staff Signature _____

Date _____