THE COOPER UNION
OFFICE OF STUDENT AFFAIRS
STUDENT HEALTH

SELF-IDENTIFICATION FORM
FOR STUDENTS WITH DISABILITIES

NAME OF STUDENT (PRINT OR TYPE)   DATE OF BIRTH

PRESENT ADDRESS   CITY   STATE   ZIP

☐ Art   ☐ Architecture   ☐ Engineering

SCHOOL   TELEPHONE   EMAIL

If you are a student with a disability, you are urged to fill out this form and attach supporting documentation, including a letter from your physician describing your disability and what accommodations you may need to succeed in college. Supporting documentation should be recent (less than a year old). Your response is voluntary. The information will be kept in a confidential file by the Office of Student Affairs, accessible to those with a legitimate need for access to the information.

We take an individualized approach to disability accommodations understanding that each student is unique and how they engage with our coursework is also unique. The Office of Student Affairs will be in contact with any student who completes this form to review your specific needs and establish a plan.

Your main contact will be the Office of Student Affairs. They will work with your academic advisor to resolve problems and arrange accommodations needed for access to your program of study and to student activities. Readers, signers, special laboratory equipment and coordination with faculty in making accommodations in course work or examinations are examples of the kinds of arrangements that can be made. Because these adjustments take time, we ask that you submit this form as soon as possible, ideally no later than July 1.

1. What is the nature of your disability?

2. Do you need accommodations to perform your course or laboratory work satisfactorily or safely?

3. Please describe each accommodation you think you need. Your documentation should support these requests.

PLEASE ATTACH YOUR SUPPORTING DOCUMENTATION FROM YOUR PHYSICIAN AND RETURN THIS FORM TO THE OFFICE OF STUDENT AFFAIRS, 29 THIRD AVENUE, NEW YORK, NY 10003, NO LATER THAN JULY 1.

MAIL FORM TO: HAVE QUESTIONS?

OFFICE OF   **29 THIRD AVENUE**   **212.353.4130**   **COOPER.EDU**
STUDENT AFFAIRS   **NEW YORK, NY 10003**   **212.353.4044 FAX**