



**ADA
Request for Services**

Return completed forms in person or by email to Counseling and ADA Services:

Garland Library, Room 233

423-636-7300 ext. 5402

counselingandadaservices@tusculum.edu

Please provide the following information. For those questions that do not apply to your request, please answer N/A to indicate not applicable.

Last Name: _____ First Name: _____ MI: _____

Preferred Name/Nickname: _____

Pioneer Email: _____ Alternate Email: _____

Student ID: _____ Major: _____

Classification (Select One). ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate

Campus (Select one): ☐ Greeneville ☐ Knoxville ☐ Morristown ☐ Online

Are you currently enrolled? Y ☐ N ☐ If no, anticipated start date: _____

Are you a Veteran? Y ☐ N ☐ Are you Dual enrolled student? Y ☐ N ☐

Vocational Rehabilitation Counselor: _____ Phone: (____) _____
(If applicable) (Your Counselor's Name)

(City)

(State)

(Zip)

ADA Services

Assistive/Adaptive Technology you will bring with you to Tusculum:

Medical Doctor: _____ Psychologists/Psychiatrist: _____
(Name) (Name)

Current Medications: _____

Date of Last Evaluation: _____

Diagnosis: _____

NATURE OF DISABILITY

☐ Acquired/Traumatic Brain Injury
☐ Attention- Deficit/Hyperactivity
☐ Autism/Aspergers
☐ Blindness/Low Vision
☐ Communication Disorders
☐ Deafness/Hard of Hearing
☐ Health Impairments
☐ Learning Disabilities
☐ Mobility Impairments
☐ Mental Health Conditions
☐ Sensory Disability
☐ Systemic Conditions
☐ Other _____

LIMITED MAJOR LIFE ACTIVITY

☐ Attention
☐ Communication/Speech
☐ Hearing
☐ Mathematics
☐ Memory/Recall
☐ Mobility/Motor Function
☐ Physical Activity
☐ Reading
☐ Seeing
☐ Social
☐ Writing
☐ Other _____

Describe how your disability impacts performance in an academic/educational environment. (i.e.: functional limitations or limited major life activities).

Please list previous accommodations that were implemented in an academic setting? Specify those that maximized your strengths as well as those that did not.

Describe the type of accommodations that you believe will allow to be the most successful during your collegiate career.

Please initial by the information included in this request

____ Request for Counseling and ADA Services ____ Confidential Release of Information

____ Informed Consent

____ Evaluation/documentation (ADA Services)

ADA Services Request for Services Statement

On _____(date) I, _____(name), submitted documents to Counseling and ADA Services for review as a request for accommodations. Tusculum is committed to providing a quality and equal education to all students. Self-disclosure of a disability is entirely voluntary. However, disclosure and submission of current documentation substantiating your disability are required to determine eligibility and identify reasonable accommodations. Completing this form and submitting the required documentation are the first steps in the process.

I acknowledge that this is only a request for services. Once my file has been reviewed, a staff person from Counseling and ADA Services will contact me within five business days on the status of my request.

Student Signature

Date

For Office Use Only

Date Received: _____

Received by: _____

Initial due date: _____

CONFIDENTIAL
RELEASE OF INFORMATION

The primary purposes of this release are to help ensure that I receive reasonable accommodations and counseling support services as needed at Tusculum. Authorized consent will remain in effect for the duration of my enrollment. I have the right to revoke the release of information at any time by completing and signing another Release of Information form.

I authorize Counseling and ADA Services to release information to the following entities:

(Please initial all that apply.)

_____ Appropriate Tusculum faculty, staff, and administrators as needed

_____ Standardized testing agents (e.g. GRE, LSAT, etc.) as specified: _____

_____ Other Post-Secondary institutions as needed as specified: _____

_____ Other off-campus professionals as specified (VR, MD): _____

_____ Flag for mobility needs or priority registration in Registrar's Office

_____ Other (parent, spouse, etc.): _____

PRINT NAME: _____ **STUDENT ID:** _____

SIGNATURE: _____ **DATE:** _____

WITNESS SIGNATURE: _____ **DATE:** _____

Informed Consent for Counseling and ADA Services

Last Name: _____ First Name: _____ MI: _____

Student ID: _____ Date: _____

Welcome to Counseling and ADA Services office at Tusculum. This informed consent is intended to give you general information about the services the office offers. Please read each section carefully before you initial. If you have any questions about the contents of this document, please ask.

Eligibility

A person must meet one of the following criteria to receive Counseling and ADA Services at Tusculum:

- 1) An admitted student who intends to enroll during the upcoming semester
- 2) A current student who is taking at least one class during the semester he or she requests services.

Counseling and ADA Services may request proof of eligibility such as asking a person to submit a copy of a Tusculum acceptance letter or a copy of the current semester's class schedule.

Student's Initials: _____

Provisions of Services

Counseling and ADA Services at Tusculum offers secular and Christian Integrated services promptly within a safe, respectful, and nonjudgmental environment. Counseling and ADA Services offers a variety of programs and resources to students. As part of the initial request for services, students are encouraged to complete a comprehensive needs assessment to develop the most appropriate and effective Counseling or ADA services plan.

ADA Services may include appropriate and reasonable accommodations, advocacy and disability counseling, assistive technology training, academic coaching, workshops, and referrals. The selection and approval of accommodations are contingent upon students' disabilities, documentation of functional limitations, and barriers to the academic environment.

Student's Initials: _____

Nature of Counseling and ADA Services

There are many research-based benefits associated with counseling and disability services. **ADA accommodations** are intended to provide students with disabilities with an equal opportunity to demonstrate their academic ability. When students, faculty, and staff share the responsibility of requesting, approving, and implementing accommodations, the process is more likely to achieve its intended outcome. Students who use ADA services may improve their communication and advocacy skills.

There are occasions when Counseling and ADA Services may result in unanticipated feelings and change, which might have an unexpected impact on students and their relationships. Students are encouraged to communicate their concerns with Counseling and ADA Services. If students believe their concerns are not addressed in a timely and appropriate manner by Counseling and ADA Services, they should initiate the Grievance Procedure provided below.

Student's Initials _____

Grievance Procedures

Students may file a grievance in the form of a written complaint against Counseling and ADA Services through the Dean of Students within ten (10) business days of the incident. The Dean of Students will contact students directly. Students are invited to continue to use all programs and services offered by the office without fear of retaliation.

Student's Initials _____

Confidentiality

Students should understand that Counseling and ADA Services maintains privacy per the ethical guidelines and legal requirements of its profession and the state of Tennessee. No records or information about students will be released from Counseling and ADA Services without students' written consent, except under these circumstances:

- Present a danger to self or another person
- The suspicion that a child, dependent adult or elder is being abused (physically or sexually) or neglected
- Under the age of 18 and disclosure of abuse or neglect is made
- A valid subpoena is issued for records or otherwise subject to a court order, or other legal process requiring disclosures

Student's Initials _____

Rights and Responsibilities

The Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973. Under these two laws, Tusculum provides equal access to all goods and services it offers to all qualified persons with a disability. Each member of the Tusculum community has rights and responsibilities to the programs offered, including extracurricular activities, are accessible to students with disabilities. Tusculum also complies with FERPA and HIPPA laws with regards to Counseling and ADA Services.

<u>Students</u>	
Rights	Responsibilities
<ul style="list-style-type: none">• Request for accommodation through Counseling and ADA Services at any time during the semester• Implementation of recommended accommodations once determined eligible by Counseling and ADA Services	<ul style="list-style-type: none">• Provide Counseling and ADA Services with verifiable documentation of disability• Provide professor with Counseling and ADA Services accommodations letter if planning to seek accommodations• Mastery of course material
<u>Counseling and ADA Services</u>	
Rights	Responsibilities
<ul style="list-style-type: none">• Interactive process• Documentation of disability• Determine accommodations on a case-by-case basis	<ul style="list-style-type: none">• Act as a mediator and advocate• Maintain the confidentiality• Refer students to appropriate campus or community resources

Faculty

Rights

- Request verification of eligibility for accommodations
 - Consult with Counseling and ADA Services about students as appropriate
 - Require students with disabilities to meet the same academic standards as their peers
- Meet with students confidentially to discuss their disability-related needs and accommodations
 - Provide classroom materials in an alternative format when documentation supports the request
 - Consult with Counseling and ADA to develop appropriate accommodations

About the Counselor/ADA Coordinator

Dr. Michell Temple, LPC (GA), LPC/MHSP (TN) provides counseling from a cognitive behavioral approach with an emphasis on meaning-making of emotions and life circumstances. She considers counseling a developmental process whereby students are challenged to grow their intellectual, behavioral, and emotional repertoire to live life abundantly. Dr. Temple holds a doctorate from the University of West Georgia in Professional Counseling and Supervision and a Master of Science in Rehabilitation Counseling from Georgia State University. She also holds two degrees in theater (BFA in Acting and MA in Theatre Education). She is earning a doctorate of philosophy from Regent University in Counselor Education and Supervision. Her current certifications include the National Certified Counselor, Rehabilitation Counselor, and Clinical Trauma Specialist. Dr. Temple holds state licensures to practice counseling in the states of Georgia (#5473) and Tennessee (#4264).

Student's Initials: _____

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Staff Review of Informed Consent Acknowledgement

Counseling and ADA Services is committed to offering students who participate in services with opportunities to be supported and challenged personally, socially, and spiritually throughout their academic journey at Tusculum. As such, the signature below acknowledges that a Counselor has reviewed the above Informed Consent with the student requesting services.

Counseling and ADA Services

Date