



Reasonable Accommodation Plan (RAP)

NAME _____ SEMESTER Spring 2018

PROGRAM History/Political Science ADVISOR _____

The **CLASSROOM ACCOMMODATIONS** listed below are meant to *EQUALIZE* my chances of success in the classroom and I may benefit from choosing to request and utilize these recommendations.

- ✓ 50% extended time on tests (quiz, test, exam). Student may test in Room 100 for extra time and reduced distractions. Student is required to make testing arrangements with instructor several days before the test date, so instructor can file the Testing Cover Sheet with the ASC Testing Center | Room 100.
- ✓ Student may use FM system. Student will provide the wireless transmitter to the instructor and the student will use the wireless receiver. Student will pick up/drop off system in Room 100 before/after each class the student wants to utilize the system.
- ✓ Student may have preferential seating.
- ✓ For lecture notes, student will utilize Blackboard (BB) to access notes/presentations posted by instructor. If not available on BB, the student can request copies of lecture notes from the instructor.
- ✓ Student may digitally record (audio only) classroom lectures *after* speaking with instructor. Audio Recording Guidelines & Permission Form is on file with the DSC: __jlq__.
- ✓ Student may request an appointment with instructor outside of class to clarify directions, questions, assignments & lecture material.
- ✓ Student will utilize tutoring, disability services and the Writing Center in Room 100 as needed.
- ✓ Student will meet with the Disability Coordinator as needed.
- I understand it is *my responsibility* to provide my instructor(s) with a copy of this RAP when I request accommodations **AND** to discuss how accommodations will be met.
- I understand that these accommodations are not retroactive (*start the date RAP provided to instructor*).
- I understand that I must follow college conduct/judicial policies, follow classroom protocol, and meet behavioral standards required for all NCC students.
- I understand that I must meet all course and program objectives/requirements required for all NCC students.
- I understand it is *my responsibility* to review, update, and **renew this RAP each semester**.
- I give permission for the disabilities support coordinator (DSC) to discuss these accommodations with my instructor/college advisors, and other NCC personnel as needed in relation to my academic success.

Student's Signature _____ Date _____

DSC's Signature _____ Date _____

STUDENT LEARNING PROFILE

Below is helpful information for the instructor about the student based on student feedback as well as additional educational documentation. These are NOT accommodations, but suggestions to assist learning.

The student identifies that he/she learns best in a class where Visual X Auditory or Hands-on learning is prevalent. Below the student has identifies the following skills as:

STRENGTH	“OKAY”
<i>Taking notes</i> <i>Starting, organizing, completing tasks</i> <i>Following directions</i> <i>Seeing</i> <i>Understanding information I hear</i> <i>Understanding information I see</i> <i>Putting thoughts into writing</i> <i>Processing speed</i> <i>Sitting for long periods</i> <i>Moving around (standing/walking)</i> <i>Tolerating stress</i> <i>Being motivated</i> <i>Being Responsible</i> <i>Finishing tests on time</i> <i>Spelling</i> <i>Word recognition/decoding</i> <i>Understanding what I read</i> <i>Reading at a normal rate/speed</i> <i>Managing time</i> <i>Spatial visualization</i>	<i>Attention/Concentration</i> <i>Interacting with others</i> <i>Understanding social cues</i> <i>Oral Expression/talking</i> <i>Self-advocacy (asking for what I need)</i> <i>Memorizing information</i> <i>Hearing</i> <i>Using my hands/ Fine motor coordination</i> <i>Doing math calculations</i> <i>Doing math word problems</i> <i>Studying</i> <i>Giving presentations to the class</i> <i>Other (Please list):</i>

Additional Suggestions of Support for Instructors: [REDACTED] *may use a FM system to assist her for better hearing and understanding of the lecture. There are instructions included with the FM system kit for both the student and instructor to use as needed. When showing video or other visual media, always use closed captioning when available.*

[REDACTED] has some long-term health issues which may impact class attendance. [REDACTED] will communicate with her instructor when she will be absent and make arrangements to turn in assignments as soon as possible if she cannot do so the day she missed class.

[REDACTED] will benefit from written instructions to accompany oral instructions for in class assignments and projects.

The use of visual aids including diagrams, concept maps, study guides, summaries and formula sheets (*when appropriate to course objectives*) will be very beneficial.

NOTE TO INSTRUCTOR from Disability Services Coordinator** *Revised 4/17*

This PLAN has been prepared for this student’s specific needs and is to be kept CONFIDENTIAL. The Accommodations listed above are among those identified in section 504 of the National Rehabilitation Act of 1973, which deals with non-discrimination of students with disabilities in post-secondary settings. You and the student may negotiate the options which best meet these recommended accommodation requests in a reasonable and timely manner for your course. If you have any questions or would like assistance, please contact the DSC in the Academic Support Center | Room 100 (603) 578-8900 ext. 1451.

INSTRUCTOR, fill in information below:

Course: _____ Instructor: _____ Date Received: _____



Reasonable Accommodation Plan (RAP)

NAME _____

SEMESTER Fall 2020

PROGRAM Liberal Arts

ADVISOR _____

The **CLASSROOM ACCOMMODATIONS** listed below are meant to **EQUALIZE** my chances of success in the classroom and I may benefit from choosing to request and utilize these recommendations.

- ✓ 100% extended time on tests (quiz, test, exam). Student may test in Testing Center for extra time and reduced distractions. Student is required to make testing arrangements with instructor several days before the test date, so instructor can file the Testing Cover Sheet with the Testing Center in the Library. *Student can request TEST READER and/or SCRIBE. Instructor please indicate on TCS. Testing time/date may be adjusted to reader/scribe availability. Provide tests in writable PDF or Word format.*
- ✓ For class notes, student will utilize Canvas to access notes/presentations posted by instructor. If notes are not available online, the student can request copies of class notes from the instructor.
- ✓ No penalty for spelling errors for in-class work
- ✓ Student may use audio textbooks (*if available*).
- ✓ Student may use of laptop or tablet for note-taking, written assignments, etc.
- ✓ Student may use of a four-function calculator in courses requiring math. Allow student to take a “snap-shot” of the board, so does not have to write out math problems during class period.
- ✓ Student may digitally record (audio only) classroom lectures *after* speaking with instructor. Audio Recording Guidelines & Permission Form is on file with the DSC: _j1q_.
- ✓ Student may have preferential seating.
- ✓ Student may take *short*, physical break from class.
- ✓ Student may request an appointment with instructor outside of class to clarify directions, questions, assignments & lecture material.
- ✓ Student will utilize tutoring, disability services and the Writing Center in the Library as needed.
- ✓ Student will meet with the Disability Coordinator as needed.
- I understand it is *my responsibility* to provide my instructor(s) with a copy of this RAP when I request accommodations **AND** to discuss how accommodations will be met.
- I understand that these accommodations are not retroactive (*starts date RAP provided to instructor*).
- I understand that I must follow college conduct/judicial policies, follow classroom protocol, and meet behavioral standards required for all NCC students.
- I understand that I must meet all course and program objectives/requirements required for all NCC students.
- I understand it is *my responsibility* to review, update, and **renew this RAP each semester**.
- I give permission for the disabilities support coordinator (DSC) to discuss these accommodations with my instructor/college advisors, and other NCC personnel as needed in relation to my academic success.

Student's Signature _____ Date _____

DSC's Signature _____ Date _____

STUDENT LEARNING PROFILE

Below is helpful information for the instructor about the student based on student feedback as well as additional educational documentation. These are NOT accommodations, but suggestions to assist learning.

The student identifies that he/she learns best in a class where Visual ___ Auditory x or Hands-on x learning is prevalent. Below the student has identifies the following skills as:

STRENGTH	CHALLENGE
Attention/Concentration-OK	Taking notes
Taking notes	Seeing
Starting, organizing, completing tasks-OK	Understanding information I see
Interacting with others	Putting thoughts into writing
Understanding social cues-OK	Using my hands/ Fine motor coordination
Oral Expression/talking	Processing speed
Following directions-OK	Finishing tests on time
Self-advocacy (asking for what I need)-OK	Spelling
Seeing	Word recognition/decoding
Understanding information I hear	Understanding what I read
Understanding information I see	Reading at a normal rate/speed
Memorizing information	Doing math calculations
Hearing-OK	Doing math word problems
Putting thoughts into writing	
Using my hands/ Fine motor coordination	
Processing speed	
Sitting for long periods-OK	
Moving around (standing/walking)-OK	
Tolerating stress-OK	
Being motivated-OK	
Being Responsible-OK	
Managing time-OK	
Studying-OK	
Giving presentations to the class-OK	

Additional Suggestions of Support for Instructors: Student Note: “Visual works well in the form of diagrams. Reading and writing are very challenging.”

The use of visual aids including diagrams, concept maps, study guides, summaries and formula sheets (*when appropriate to course objectives*) will be very beneficial.

NOTE TO INSTRUCTOR from Disability Services Coordinator** Revised 4/17

This PLAN has been prepared for this student’s specific needs and is to be kept CONFIDENTIAL. The Accommodations listed above are among those identified in section 504 of the National Rehabilitation Act of 1973, which deals with non-discrimination of students with disabilities in post-secondary settings. You and the student may negotiate the options which best meet these recommended accommodation requests in a reasonable and timely manner for your course. If you have any questions or would like assistance, please contact the DSC in the Academic Support Center | Library (603) 578-8900 ext. 1451.

INSTRUCTOR, fill in information below:

Course: _____ Instructor: _____ Date Received: _____



Reasonable Accommodation Plan (RAP)

NAME [REDACTED] SEMESTER Spring 2020

PROGRAM Accounting ADVISOR _____

The **CLASSROOM ACCOMMODATIONS** listed below are meant to *EQUALIZE* my chances of success in the classroom and I may benefit from choosing to request and utilize these recommendations.

- ✓ Student may take physical breaks from class due to a physical condition, but is responsible for missed material. The student may need to leave the classroom during a test for a brief period. The student must leave all materials and cell phone with the instructor to ensure academic integrity. (It may not be possible to lengthen the test time in the classroom due to scheduling, etc.)
- ✓ Student may opt to test in the Library with up to 50% extended time due to possible breaks needed due to student's physical condition. Student is required to make testing arrangements with instructor several days before the test date, so instructor can file the Testing Cover Sheet with the ASC Testing Center | Library.
- ✓ For lecture notes, student will utilize Canvas to access notes/presentations posted by instructor. If not available online, the student can request copies of lecture notes from the instructor.
- ✓ Student may digitally record (audio only) classroom lectures *after* speaking with instructor. Audio Recording Guidelines & Permission Form is on file with the DSC: _jlq_.
- ✓ Student may use a blank paper during a test for reading test questions (quiz, test, exam).
- ✓ Student may request an appointment with instructor outside of class to clarify directions, questions, assignments & lecture material.
- ✓ Student will utilize tutoring, disability services and the Writing Center in the Library as needed.
- ✓ Student will meet with the Disability Coordinator as needed.
- I understand it is *my responsibility* to provide my instructor(s) with a copy of this RAP when I request accommodations **AND** to discuss how accommodations will be met.
- I understand that these accommodations are not retroactive (*starts date RAP provided to instructor*).
- I understand that I must follow college conduct/judicial policies, follow classroom protocol, and meet behavioral standards required for all NCC students.
- I understand that I must meet all course and program objectives/requirements required for all NCC students.
- I understand it is *my responsibility* to review, update, and **renew this RAP each semester**.
- I give permission for the disabilities support coordinator (DSC) to discuss these accommodations with my instructor/college advisors, and other NCC personnel as needed in relation to my academic success.

Student's Signature _____ Date _____

DSC's Signature _____ Date _____

STUDENT LEARNING PROFILE

Below is helpful information for the instructor about the student based on student feedback as well as additional educational documentation. These are NOT accommodations, but suggestions to assist learning.

The student identifies that he/she learns best in a class where Visual x Auditory x or Hands-on x learning is prevalent. Below the student has identifies the following skills as:

STRENGTH	CHALLENGE
<i>Attention/Concentration</i> <i>Taking notes</i> <i>Starting, organizing, completing tasks</i> <i>Interacting with others</i> <i>Understanding social cues</i> <i>Oral Expression/talking</i> <i>Following directions</i> <i>Self-advocacy (asking for what I need)</i> <i>Seeing-OK</i> <i>Understanding information I see-OK</i> <i>Memorizing information</i> <i>Putting thoughts into writing</i> <i>Using my hands/ Fine motor coordination</i> <i>Processing speed</i> <i>Sitting for long periods-OK</i> <i>Moving around (standing/walking)-OK</i> <i>Tolerating stress</i> <i>Being motivated</i> <i>Being Responsible</i> <i>Finishing tests on time-OK</i> <i>Understanding what I read-OK</i> <i>Doing math calculations-OK</i> <i>Doing math word problems-OK</i> <i>Managing time</i> <i>Studying</i> <i>Giving presentations to the class</i>	<i>Understanding information I hear</i> <i>Hearing</i> <i>Spelling</i> <i>Word recognition/decoding</i> <i>Reading at a normal rate/speed</i>

Additional Suggestions of Support for Instructors: Student has a chronic physical condition that may require her to leave the classroom in order to attend to her physical needs.

The use of visual aids including diagrams, concept maps, study guides, summaries and formula sheets (*when appropriate to course objectives*) will be very beneficial.

NOTE TO INSTRUCTOR from Disability Services Coordinator** *Revised 4/17*

This PLAN has been prepared for this student's specific needs and is to be kept CONFIDENTIAL. The Accommodations listed above are among those identified in section 504 of the National Rehabilitation Act of 1973, which deals with non-discrimination of students with disabilities in post-secondary settings. You and the student may negotiate the options which best meet these recommended accommodation requests in a reasonable and timely manner for your course. If you have any questions or would like assistance, please contact the DSC in the Academic Support Center | Library (603) 578-8900 ext. 1451.

INSTRUCTOR, fill in information below:

Course: _____ Instructor: _____ Date Received: _____