

# DOCUMENTATION OF SPECIAL ACCOMMODATIONS

## DISABILITY RELATED NEEDS

If you have a disability that requires an accommodation, you must fully complete all sections of this form. This form only needs to be completed once for classes and exams through the Illinois Property Assessment Institute. Special Accommodation requests may take up to several weeks to process. Reasonable Accommodations must be approved prior to scheduling your course or exam.

### Section 1

Have you requested an accommodation in the past?  Yes  No

If yes, please list all accommodations you have been previously approved for during an examination or in a training/instructional setting.

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### Section 2: Professional Information

This section must be completed by an appropriate professional (education professional, doctor, psychologist, psychiatrist) to certify that your disabling condition requires the requested accommodation. In addition, the professional must submit a formal letter indicating what the request is, how the request should be accommodated for the applicant's disability, and the professional's contact information.

I have known \_\_\_\_\_ since \_\_\_\_\_  
(Applicant) (Date)  
in my capacity as a \_\_\_\_\_  
(Professional Title)

The applicant has discussed with me the nature of the test and/or training to be administered. It is my opinion that because of this applicant's disability he/she should be accommodated by providing the following:

Exam read to applicant  Separate testing area

Other (please specify): \_\_\_\_\_

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_ License # (if applicable) \_\_\_\_\_

### Section 3: Individual Accommodation Request

I request to be accommodated by providing the following:

Exam read to applicant  Separate testing area

Other (please specify): \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_