



GUIDELINES FOR DOCUMENTATION

VERIFICATION OF A HEARING DISABILITY

The Student Academic Support Services (SASS) Office provides accommodations to students diagnosed with a disability that substantially impacts one or more major life functions. To determine eligibility for services and appropriate accommodations, current and comprehensive documentation of the disability from a licensed professional who is credentialed to perform such evaluation is required. If you have any questions pertaining to documentation needs, feel free to contact **Student Academic Support Services at (740) 284-5358 or Email tgreathouse@franciscan.edu**.

STUDENT INFORMATION: **** To be completed by the student ****

Full Legal Name: _____

Date of Birth: _____ Cell Phone: _____

FUS ID#: _____ FUS Email: _____@student.franciscan.edu

Address: _____

MEDICAL INFORMATION: **** To be completed by the diagnosing professional ****

1. When was the hearing loss diagnosis first made, and when was your last contact with the student?

2. Indicate all instruments and procedures used to diagnose the hearing loss. If available, please include the most recent audiogram.

3. What is the severity of the disorder? Mild Moderate Severe

4. Is the hearing loss expected to remain stable or is it expected to decline? If it is expected to decline, describe the expected progression of the hearing loss.

5. What means of communication has this student used in the past? Also, describe the student's skill in the use of his/her communication skills.

6. How does the hearing loss impact this student in an educational setting (functional limitations)? Please be specific.

7. What recommendations do you have regarding accommodations and your rationale for each of the accommodations?

PROVIDER INFORMATION:

Signature: _____ Date: _____

Print Name and Title: _____

State of License: _____ License Number: _____

Address: _____

Telephone: _____

***Once completed, please return this form back to the student so that they may upload it with their SASS Disability Services Application (found on the FUS website).
If you have questions regarding this form, please call SASS at 740-284-5358.***