

STUDENT ACCESS CENTER

Application for Reasonable Accommodations

THIS APPLICATION MUST BE COMPLETED BY THE STUDENT REQUESTING SERVICES.

HOUSING REQUESTS REQUIRE A DIFFERENT FORM: https://www.une.edu/student-access-center/request-for-accommodations

Today's date:			
Student Name:			
Chosen Name:		Chosen Pronouns:	
PRN/Student ID (N/A if pros	reactive studently		
PKN/Student ID (N/A if pros	spective student):		
Permanent address (stree	et, city, state, zip code):		
Primary Phone:		Would you like us to refer you (name and email only) to	
.		the Student Academic Success Center (SASC) for additio academic support?	
Email:		Yes, please refer me:	
	mmer) and year you will begi graduate Graduate	n <u>or</u> began at UNE COM Transfer	
Career goal:	Ex	spected date of graduation:	
Major	Advisor		
Academic background:	High school Bachelor's d Other	egree Master's degree Doctorate	
Did you receive support services at another educational institution? Yes No If yes, please describe:			
What is your primary disa	bility?		
What (if any) is your seco	ndary disability?		

Please describe how your disability affects your major li include but are not limited to learning, concentrating, sl	•		
Please list the accommodations you are requesting:			
By signing below, I certify that the information I have provided in this application is, to the best of my knowledge, true, complete, and accurate. By signing below, I acknowledge that I understand the accommodations process requires my full participation and interaction with the Student Access Center.			
Signature:	Date:		
Assistance provided by (if applicable)			
This application and any supporting documentation, wh	ich will remain confidential under the scope of		
pertinent laws regarding post-secondary education, can be submitted via ground mail, email, or fax to:			
For students taking classes on the	For students taking classes on the		
Biddeford Campus:	Portland Campus:		
	·		
Student Access Center	Student Access Center		
University of New England	University of New England		
11 Hills Beach Road	716 Stevens Avenue		
Biddeford, ME 04005	Portland, ME 04103		
Phone: 207-602-2119	Phone: 207-221-4438		
Fax: 207-602-5971	Fax: 207-523-1919		
Email: bcstudentaccess@une.edu	Email: <u>pcstudentaccess@une.edu</u>		

Documentation guidelines can be found at une.edu/student-access-center/request-for-