



## REASONABLE ACCOMMODATIONS REQUEST ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD/ADD)

This form and other comprehensive documentation must be completed by a licensed professional with specialized expertise in the assessment of ADHD/ADD such as an educational psychologist or a neuropsychologist. The professional must provide evidence of the current impairment, describe the type and extent of the disability, and specify the effect of such disability on the student's ability to achieve academic success in a law school environment. To ensure provision of appropriate and reasonable accommodations, Concordia University School of Law requires students to provide current (within 3 years) and comprehensive documentation of disability. Evaluation and test results should: (1) Have been administered within the last three years unless treating professional can identify why results should be considered current; (2) Identify normative academic skills deficits(s); (3) Identify normative information processing deficits(s); (4) Certify that the student's intellectual ability is within the normal range of functioning or higher. **The diagnostic report must include copies of the evaluation and a thorough battery of age-appropriate psychological tests and test scores administered within the last three years from the date of application.** The Americans with Disabilities Act defines a disability as a physical or mental impairment that *substantially* limits one or more major life activities. *To properly evaluate eligibility and identify appropriate accommodations, this form must be fully completed by the diagnosing and/or treating professional.*

### CONSENT FOR RELEASE OF INFORMATION: (To be completed by STUDENT)

I, \_\_\_\_\_, authorize the release of the following information to Concordia University School of Law to be used to determine my eligibility for accommodations.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

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### TO BE COMPLETED BY THE STUDENT'S TREATING PROFESSIONAL:

**[Must be a Current (within 3 years) and comprehensive documentation of disability]**

1. ADHD/ADD Primary Diagnosis: (Specify whether combined type, predominantly inattentive type, or predominantly hyperactive-impulsive type.)

\_\_\_\_\_ Indicate Severity:      mild      moderate      severe

2. Date of last office visit: \_\_\_\_\_

3. Date of original diagnosis: \_\_\_\_\_

4. Does this disorder substantially limit the student in a major life activity?      YES      NO

5. List the major life activities that are limited:

\_\_\_\_\_  
\_\_\_\_\_



6. What is the academic and developmental history of the disability? (Attach any relevant documents.)  
\_\_\_\_\_  
\_\_\_\_\_
7. How does the student's disability currently present itself?  
\_\_\_\_\_
8. Identify instruments, tests, and, procedures used to assess and diagnose ADHD/ADD: (Attach copies of the reports that show the instruments used and the history of symptoms.)  
\_\_\_\_\_
9. Identify other age-appropriate psychological tests and test scores used to assess normative academic skill and information processing deficits(s): (Attach copies of the reports that show the testing instruments used and the test results.)  
\_\_\_\_\_  
\_\_\_\_\_
10. If tests identified in questions 8 and 9 were administered more than 3 years from date of application, provide a rationale for why they should be considered as current:  
\_\_\_\_\_  
\_\_\_\_\_
11. Were other diagnoses or conditions ruled out as the primary cause of academic skills deficits (e.g., anxiety, psychological disturbance, etc.)?  
\_\_\_\_\_
12. Identify how this diagnosis may affect the student in a law school academic environment:  
\_\_\_\_\_  
\_\_\_\_\_
13. List current medication(s), dosage and frequency used to treat the disability:  
\_\_\_\_\_
14. Identify how the medication might adversely impact the student in a law school academic setting:  
\_\_\_\_\_
15. What classroom and testing accommodations do you recommend that would assist this student in a law school academic setting? Please be specific:  
\_\_\_\_\_

\_\_\_\_\_  
(Functional Limitation)

\_\_\_\_\_  
(Recommendation)

\_\_\_\_\_  
(Functional Limitation)

\_\_\_\_\_  
(Recommendation)

\_\_\_\_\_  
(Functional Limitation)

\_\_\_\_\_  
(Recommendation)

*Please attach any additional recommendations on a separate page.*



16. Required Attachments:

- Diagnostic report that includes evaluation and tests (Questions 8 & 9) results that:
  - i. Have been administered within the last three years or explanation (Question 10);
  - ii. Identify normative academic skills deficits(s);
  - iii. Identify normative information processing deficits(s);
  - iv. Certify that the student's intellectual ability is within the normal range of functioning or higher.
- Copy of treating professional's business card
- Any addition items necessary to bring this form to a current (within 3 years) and comprehensive documentation of disability.

17. Printed name and credentials of treating professional: ***(DOCUMENTATION COMPLETED BY ANYONE OTHER THAN THE TREATING OR DIAGNOSING PROFESSIONAL WILL NOT BE ACCEPTED.)***

\_\_\_\_\_

\_\_\_\_\_

Area of Specialty: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

***Submit request and attachments to Student Affairs at Concordia University School of Law.***