

## PHYSICAL DISABILITY DOCUMENTATION GUIDELINES

## Student Information To be completed by the student

Name: Student ID:	
Email: Phone:	
To the student: These guidelines will help you understand the documentation requirement establishing a physical disability. To be eligible for accommodations related to a physical documentation must show that it causes limitation/s in a major life activity. It is also necession accommodations will help compensate for those limitation/s.	disability, the
For many physical conditions, the limitations are apparent; but for other conditions the lin readily observable. Furthermore, the severity and permanency of conditions are variable. I reasons, a diagnosis of a physical condition may not provide sufficient information to esta disability or need for accommodation.	For these
A report from a qualified licensed professional who is familiar with your condition and had evaluating and diagnosing your condition will be needed. Given variability in symptoms at changes in functional limitations, documentation should be current, ideally no more than a may choose to provide Disability Support Services (DSS) with supplemental information relevant to demonstrating your need for accommodation, such as past evaluations, medical other sources of information. Additionally, you will be asked to provide any history of account as school records, Individualized Education Plans (IEPs), 504 Plans, and/or verification accommodation from other schools or testing agencies.	and potential a year old. You you feel is al records, or commodation
Along with your online application, you will need to submit to DSS all supporting docume your documentation has been submitted and reviewed, DSS will email your Lion account results. Please note that DSS will make every effort to respond to your request within 15 to once you have provided all of your documentation.	regarding the
We encourage you to read the following guidelines before you share them with the lie qualified professional with expertise in evaluating and diagnosing your physical concretently evaluated you. Please contact the DSS Office at <a href="mailto:dsslmu@lmu.edu">dsslmu@lmu.edu</a> or (310) 338-have any questions.	dition who mos
I have read and understand the information provided above.	
Signature: Date:	

## Physical Disability Documentation Guidelines Licensed Professional Information To be completed by the Licensed Professional

To be completed by the Licensed Professional

Name and Title of Licensed Professional:		
License Certification Number (Describe credentials):		
Business Address:		
Telephone Number:		
Signature:	Date:	

To the Licensed Professional with expertise in evaluating and diagnosing a Physical Disability:

Based on a physical condition, your patient is seeking services through Loyola Marymount University's Disability Support Services (DSS) Office. To be eligible for services this student must establish that they have a physical condition that results in limitation/s in a major life activity. Recommended accommodations should be directly related to those limitations with an explanation of how the accommodations have helped compensate for the limitation/s or why they are needed now.

The limitations associated with some physical conditions are apparent, but there are many conditions that are not obvious, and disorders can manifest in different ways depending on the patient. Furthermore, physical conditions may or may not be permanent, and the nature and severity of symptoms and limitations can fluctuate. For these reasons, it is important that the information that you provide addresses this student's current condition and how it may impact their studies and life on campus.

Diagnosis alone, prescription notes, and brief letters generally do not provide enough information to establish a disability or to plan for educational accommodation.

To assist this student, we ask that you respond to each of the six points below in a typed narrative report, signed and on letterhead. Complete documentation will enable the University to provide appropriate accommodation to the student in a timely manner.

- 1. A medical history and diagnosis that includes the age of onset of the physical condition.
- 2. The time frame in which you have treated this patient, including the most recent evaluation or treatment. Detail the nature, frequency, and severity of symptoms present at your last visit and how major life activities are limited. Specific, objective information beyond the patient's self-report is most helpful.
- 3. Current medication/s including dosage, side effects, and compliance.
- 4. Other current therapeutic interventions, assistive devices, and compliance.
- 5. The prognosis, which includes likelihood for improvement or deterioration and in what approximate time frame.

6. If accommodations are needed, please make specific recommendations. Each recommendation should be related to this student's limitation.

Thank you for your time in helping this student. Additionally, please feel free to add any verifying documentation from your files. If you have questions, please contact the DSS Office at <a href="mailto:dsslmu@lmu.edu">dsslmu@lmu.edu</a> or (310) 338-4216.