Registration and Documentation

Policy on Student and Applicant Accommodations

II. Registration and Documentation

In order to receive disability accommodations, students and applicants must timely register with ARS. Accommodations and modifications received in high school or at another post-secondary institution will not automatically transfer to UNC-Chapel Hill. Instead, it is necessary for students and applicants for admission to register with the University by submitting the following documentation:

1. Self-Identification Form, which must be completed personally by the student or applicant and is available online at https://ars.unc.edu/students/new-applicants/register-ars [1]
2. Current documentation prepared by a medical professional or health care provider that describes the student?s or applicant?s diagnosis, the functional limitations this diagnosis causes, and the accommodations or services necessary to address the diagnosis
3. Historical documentation, if applicable, regarding accommodations the student or applicant has previously received to address the disability, including but not limited to an Individualized Education Plan (?IEP?), a Summary of Performance (?SOP?) or a 504 Plan.

Following receipt of this information, ARS may request the opportunity to speak personally with the student or applicant to obtain additional information or may recommend that the student or applicant submit further documentation or information to support the accommodations request.

Students may use the Self-Identification Form and submit documentation at any time to
initiate the registration process and to request accommodations, but accommodations cannot be provided retroactively. For example, ARS generally cannot provide accommodations for an examination if a student requests accommodations only after the student takes the examination (e.g., via a determination of grade change or other retroactive change). In order for ARS to consider requests for reasonable accommodations, students must submit the documentation discussed within this section of the Policy to ARS at least 14 calendar days prior to the start of the course or the exam for which the student seeks accommodations. Similarly, applicants must submit the documentation discussed within this section of the Policy to ARS at least 14 calendar days prior to submitting an application for admission to an academic program at the University. The determination regarding applicant accommodations will be made separately from the admissions determination.

Documentation must clearly articulate how the student?s or applicant?s disability or chronic medical condition substantially limits one or more major life activity and how the accommodations requested will help mitigate this effect. ARS utilizes flexibility and discretion in determining how recent documentation must be, especially for conditions that are permanent or non-varying. Changing conditions or changes in how a condition affects the individual may warrant more frequent updates. Documentation from the student?s or applicant?s current or most recent level of education (e.g., undergraduate, graduate, secondary) is most helpful. Older documentation may be acceptable for conditions that are stable over time or where the documentation contains a sufficient description of the student?s or applicant?s limitations and mitigating effects of accommodations.

Please also note that ARS will not interpret a diagnosis or infer the current impact or functional limitations described in documentation. Because they typically include only information about a student?s or applicant?s prior accommodations rather than specific information about the student?s limitations, the following materials, standing alone without explicit reference to the effect of a diagnosis upon current functioning, are generally insufficient for determining a student?s or applicant?s eligibility for disability accommodations:

1. Medical records, medical chart notes, or prescription pad notations.
2. High school IEPs, SOPs, or 504 Plans.
3. Disability-related documents prepared for other agencies (e.g., Social Security Administration documentation, Department of Veterans Affairs records).

Adequate and sufficient documentation generally includes a psychological/psycho-educational evaluation or a letter from a medical/mental health provider which addresses the areas described below.

1. **Qualifications of Provider.** Documentation must be provided on the clinician?s office or practice letterhead and must be dated and signed by a professional who
is licensed or certified in the area for which the diagnosis is made. The letter must include the provider’s name, title, and license/certification credentials. The provider may not be a member of the student’s or applicant’s family or otherwise have a close personal relationship to the student or applicant.

2. **Diagnosis and History.** Documentation must include a diagnostic statement identifying the disability and ideally the ICD or DSM classification along with any relevant personal, psychosocial, medical, developmental, and educational history.

3. **Description of Diagnostic Methodology.** Documentation must include a full description of the diagnostic methodology used, including data and measurements from appropriate evaluation instruments. The results obtained should draw a direct link from the diagnosis to the functional limitations of the disability. For cognitive disorders, evaluations should use adult norms.

4. **Current Impact and Functional Limitations.** Documentation must include a clear description of the current impact and functional limitations of the condition pertaining to the academic, workplace, or residential settings. The provider should describe whether symptoms are constant or episodic, as well as the frequency and/or duration of those symptoms. The provider should also specify any treatments, medications, services, or assistive technology that has been prescribed or that is in use and also describe their mediating effects and potential side effects.

5. **Recommendations.** Documentation may include the provider’s accommodation recommendations, which if given should be directly linked to the impact or functional limitations associated with the disability or to medications or treatments prescribed to control symptoms. Please note that ARS welcomes and considers accommodation recommendations from medical professionals but that ARS will make the ultimate determination regarding reasonable and appropriate accommodations.