



ACCOMMODATION LETTER REQUEST

Request Date: _____

Name: _____ Fall Winter Spring Summer

ID: _____ Email: _____@lasierra.edu

- I am requesting Office of Accessibility Services to write a letter on my behalf, identifying my registration with OAS and a list of accommodations I am currently receiving.
- I understand that it is my responsibility to deliver the accommodation letter to my instructor(s).
- I understand that once the request is completed, OAS will prepare the letter within three working days. I will have the ability to print my own letters, forward the letter email to professors, or can pick up letters at the OAS office during normal office hours.

I have read and agree to the above responsibilities and statements.

Student signature: _____ Date: _____

Course	Accommodation
EXAMPLE: UNST 404C	Glean & Testing Accommodations

If at any point during the term you need help claiming accommodations or need to have accommodations reevaluated in order to ensure equal access to classes, please contact Accessibility Services at oas@lasierra.edu or by calling (951) 785-2452 to set up a meeting with Accessibility Services staff.