

**Semester Accommodation Request Form
Request for Faculty Notice**

Student Name: _____ Date: _____

Student ID: _____

I am a Dual Enrollment Student at _____

Please prepare an accommodation letter for the class(es) listed below:

Course/Section: _____ Semester: Fall Spring Summer

Course/Section: _____ Semester: Fall Spring Summer

Course/Section: _____ Semester: Fall Spring Summer

Course/Section: _____ Semester: Fall Spring Summer

Course/Section: _____ Semester: Fall Spring Summer

Course/Section: _____ Semester: Fall Spring Summer

Course/Section: _____ Semester: Fall Spring Summer

I prefer to:

Pick up my letter(s) during the first week of the semester

Have my letter(s) emailed to me

I realize I am responsible for discussing my accommodations with each of my professors after receiving my accommodation letter to discuss specific arrangements for any necessary accommodations, and understand that my accommodations are not retroactive.

Student Signature: _____ Date: _____