



Division of Student Affairs  
Dean of Students Department  
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[www.disabilitycenter.fsu.edu](http://www.disabilitycenter.fsu.edu)

## CONFIDENTIAL

### MEMORANDUM

TO: Faculty and Instructional Personnel  
FROM: Bea Awoniyi, Assistant Dean of Students and Director, Student Disability Resource Center  
DATE: **December 15, 2005**  
RE: **John Doe** FSU-ID: **XXXX-XXXX-XXXX-XXXX**

The purpose of this memorandum is to assist you, the faculty acting on behalf of the University, to provide reasonable and appropriate academic accommodations to students with documented disabilities registered in your class as mandated by law. Florida State University seeks to assure that qualified students with disabilities will not be disadvantaged because of the limitations created by their disability. FSU is committed to providing students with disabilities an educational opportunity equal to that of their peers without creating an unfair advantage.

It is the University's policy that students requiring accommodations **MUST** identify themselves and register with the Student Disability Resource Center (SDRC), the University's designated office responsible for determining eligibility, level of service, and reasonable and appropriate accommodations.

**John** is a student in your course this semester and is registered with SDRC. We have documentation on file and have met with her verifying a need for the following classroom and exam accommodations:

- **Classroom/Instructional Accommodations**
  - Preferential sitting (Front of class)
  - In class note taker (Please make announcements on her behalf inviting someone in class to take notes)
  - Increase fonts (16 point fonts with good spacing in between words and paragraphs)
  - Professors' notes when available
- **Test/Exam Accommodations**
  - Reader for tests
  - Extended time on tests
  - Distraction reduced environment (Testing Center in SDRC)

I understand that it is my responsibility to arrange a meeting within one week after receiving this form to discuss the above accommodations with the instructor.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

