



DISABLED STUDENT PROGRAMS AND SERVICES

Disability Verification



Section 1: Student Information to be Completed by Student

Student Name	Student ID #	Date	
Address	City	State	Zip

Section 2: To be Completed by Licensed or Certified Professional

Licensed or certified professional name	License or Certificate Number	Phone Number	
Address	City	State	Zip

Section 3: To be Completed by Licensed or Certified Professional

Please provide the following information in full to help determine reasonable educational accommodations for this student:

Diagnosis	DSM-5 Code (if applicable)	Severity <input type="checkbox"/> Severe <input type="checkbox"/> Moderate <input type="checkbox"/> Residual/Remission
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Functional Limitations: Please provide the following activities which are significantly limited by the above stated disabilities.

Physical			
<input type="checkbox"/> Ambulation	<input type="checkbox"/> Balance	<input type="checkbox"/> Coordination	<input type="checkbox"/> Fine Motor
<input type="checkbox"/> Lifting	<input type="checkbox"/> Manual Dexterity	<input type="checkbox"/> Range of Motion	<input type="checkbox"/> Reaching
<input type="checkbox"/> Standing	<input type="checkbox"/> Sitting	<input type="checkbox"/> Stooping	
Learning			
<input type="checkbox"/> Adaptive Skills Areas	<input type="checkbox"/> Attention/Concentration	<input type="checkbox"/> Information Processing	<input type="checkbox"/> Math Reasoning
<input type="checkbox"/> Memory	<input type="checkbox"/> Reading	<input type="checkbox"/> Writing	
Sensory			
<input type="checkbox"/> Hearing	<input type="checkbox"/> Visual		
Communication			
<input type="checkbox"/> Expressive Language	<input type="checkbox"/> Interacting With Others	<input type="checkbox"/> Receptive Language	
Other			
<input type="checkbox"/> Alertness	<input type="checkbox"/> Breathing	<input type="checkbox"/> Stamina	<input type="checkbox"/> Testing

Is the disability Observable? Yes No

Duration of disability Permanent/Chronic Temporary <45 days* Temporary >45 days*

*If the nature of the condition is temporary, please provide the date of your next re-evaluation and estimated length of disability.

Section 4: Verification of Licensed or Certified Professional

I understand that the information provided will become part of the student record subject to the Federal Family Education Rights and Privacy Act (FERPA) of 1974 and may be released to the student on their written request

Licensed or Certifying Professional Signature

DATE



DISABLED STUDENT PROGRAMS AND SERVICES

The following disability categories (with) definitions are used for funding purposes as set forth in Sections 56032-44 of California Educational Code, Title V



56032. Physical Disability

Physical disability is defined as a limitation in locomotion or motor functions. These limitations are the result of specific impacts to the body's muscular-skeletal or nervous systems and limit the student's ability to access the educational process.

56034. Deaf and Hard of Hearing (DHH)

Deaf and Hard of Hearing (DHH) is defined as a total of partial loss of hearing function that limits the student's ability to access the educational process.

56035. Blind and Low Vision

Blindness and low vision is defined as a level of vision that limits the student's ability to access the educational process.

56036. Learning Disability

Learning Disability (LD) is defined as a persistent condition of presumed neurological dysfunction which may exist with other disabling conditions. The dysfunction is not explained by lack of educational opportunity, lack of proficiency in the language of instruction, or other non-neurological factors, and this dysfunction limits the student's ability to access the educational process. To be categorized as a student with a learning disability a student must meet the following criteria through psycho-educational assessment verified by a qualified specialist certified to assess learning disabilities: (a) Average to above-average intellectual ability; and (b) Statistically significant processing deficit(s); and/or (c) Statistically significant aptitude-achievement discrepancies.

56037. Acquired Brain Injury (ABI)

Acquired Brain Injury (ABI) is defined as a deficit in brain functioning which results in a total or partial loss of cognitive, communicative, motor, psycho-social and/or sensory-perceptual abilities, and limits the student's ability to access the educational process.

56038. Attention-Deficit Hyperactivity Disorder (ADHD)

Attention-Deficit Hyperactivity Disorder (ADHD) is defined as a neurodevelopmental disorder that is a persistent deficit in attention and/or hyperactive and impulsive behavior that limits the student's ability to access the educational process.

56039. Intellectual Disability (ID)

Intellectual disability (ID) is defined as significant limitations both in intellectual functioning and in adaptive behavior that affect and limit the student's ability to access the educational process. An individual may have an intellectual disability when: (a) the person's functioning level is below average intellectual ability; and (b) the person has significant limitations in adaptive skill areas as expressed in conceptual, social, academic and practical skills in independent living and employment; and (c) the disability originated before the age of 18.

56040. Autism Spectrum

Autism Spectrum disorders are defined as neurodevelopmental disorders described as persistent deficits which limit the student's ability to access the educational process. Symptoms must have been present in the early developmental period, and cause limitation in social, academic, occupational, or other important areas of current functioning.

56042. Mental Health Disability

Mental Health disability is defined as a persistent psychological or psychiatric disability, or emotional or mental illness that limits the student's ability to access the educational process. For purposes of this subchapter, conditions that are not described and/or excluded in the American Psychiatric Association Diagnostic and Statistical Manual (DSM) or the American with Disabilities Act (ADA) are not covered in this category.

56044. Other Health Conditions and Disabilities

This category includes all students with disabilities, as defined in Section 56002, with other health conditions, and/or disabilities that affect a major life activity, which are otherwise not defined in Sections 56032-56042, but which limit the student's ability to access the educational process.

The Rio Hondo College uses the information requested on this form for the purpose of determining a student's eligibility to receive authorized special services provided by the Disabled Student Programs and Services (DSPS). Personal information recorded on this form will be kept confidential in order to protect against unauthorized disclosure. Portions of this information may be shared with the Chancellor's Office of the California Community Colleges or other state or federal agencies. However, disclosure to these parties is made in strict accordance with applicable statutes regarding confidentiality including the Family Educational Rights and Privacy Act (FERPA) 20 U.S.C. 1232 (g). Pursuant to Section 7 of the Federal Privacy Act (Public Law 93-579; 5 U.S.C. sec. 552a, note), providing your social security number is voluntary. The information on this form is being collected pursuant to California Code Sections 67310-67312, and 84850; and California Code of Regulations, Title 5, Section 56000 et seq.