

**Request for Additional Accommodations**

List the type(s) of additional accommodation(s) or the revision of current accommodations that you are requesting:

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Statement regarding your need for the additional accommodations or the revision of current accommodations:

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Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_

Please send the completed form to [disability.services@point.edu](mailto:disability.services@point.edu)

The Director of Disability Services will make the final determination for the provision of reasonable and appropriate additional or revised accommodations.

Additional Accommodation Request | Revised 2022