

**TEXAS SOUTHERN UNIVERSITY  
THURGOOD MARSHALL  
SCHOOL OF LAW**

**2015 - 2016  
ACCOMMODATIONS INFORMATION**

**OFFICE OF STUDENT AFFAIRS**

**Room 223B  
Dean's Suite  
713-313-4468**

Updated: July, 2015

## I. Identifying the Need for Accommodations

Students with disabilities who require accommodations must self-identify those needs to the Assistant Dean for Student Development as follows:

### Fall Semester

Accommodations other than exams	August or as need arises
Interim Exams	As need arises
Final Exams	November 15 <sup>th</sup>

### Spring Semester

Accommodations other than exams	January or as need arises
Final Exams	November 15 <sup>th</sup>

### Summer

Final Exams	First Week of Classes
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Students with disabilities who require accommodations make these needs known in a timely fashion and provide appropriate documentation requirements. **(See Application).**

Do not assume that your information is known to the Assistant Dean for Student Development. Submit all completed forms and documentation to the Office of Student Affairs. The law school will review the application and prepare written notices to the student and his/her professors.

Students who do not require accommodations need not make their disabilities known. The information on the nature of the student's disability and accommodations is treated as confidential information under applicable federal, state, and university laws and policies, and is only provided to individuals who are privileged to receive such information on a need-to-know basis. Faculty members who are apprised of a disability are advised that the nature of the student's disability is confidential and not released without the student's written permission.

In some cases where only minor accommodations are required (such as requesting to sit in the front row because of a visual, hearing, or other impairment), the student should feel free to request this of the faculty member. If requests for minor accommodations are not responded to adequately, the student should make the request to the Assistant Dean for Student Development.

## **II. Accommodations**

The Law School will make reasonable accommodations for properly documented disabilities. Such accommodations will not be provided if they fundamentally alter the nature of the program or if they would be unduly burdensome either financially or administratively.

**A. Academic Modification**

Academic modifications include reduced course loads to a minimum of 12 hours, extended time for exams or similar modifications. The student is expected to complete the curriculum as listed in the Student Rules and Regulations, no exceptions.

Only modifications that do not fundamentally alter the nature of the program and that are not unduly burdensome financially or administratively are required by law. While the law school must provide justification for refusing to allow a requested reasonable accommodation, higher education institutions are given substantial deference in establishing their academic requirements. Having a disability does not authorize an excused absence. **This office does not issue excused absences.**

**B. Auxiliary Services**

Auxiliary services may include, but are not limited to, assistance with photocopying and library retrieval, assistance in getting to and from classes, and other support services in connection with the academic programming. Services for personal use are not provided.

The Law School does not provide individual tutorial assistance tailored to the special needs of learning disabled students. The Law School offers a tutorial

program for first year law students, which does not discriminate on the basis of disability. The learning disabled student may participate in the program. Additionally, the Assistant Dean for Student Development may refer learning disabled students to the University's Office of Disabled Students services in order to obtain additional help in appropriate cases.

Occasional assistance in the library may be obtained by making a request of the library desk staff. The student who will require more extensive assistance and/or assistance on a regular basis should make this need known to the Assistant Dean for Student Development. That office will work with the Law Library staff to facilitate an appropriate schedule of assistance. Students who are unable to receive satisfactory responses to their requests for assistance should direct this concern to the Assistant Dean for Student Development.

### **C. Exam Modifications**

Exam modifications may include additional time to take the exam, restroom breaks, and taking the exam in a separate exam room from the class. Students requesting certain exam modifications may be asked to ascertain the format of the exam in order to determine the appropriate modification. The need for additional time would be affected by whether the exam will be in a multi-state format or an essay form.

All exam modification requests are to be directed to the Assistant Dean for Student Development. (This form is included in the application. (**See Application**)). Because of the extra time involved to arrange these requests, students must make such requests no later than the dates listed in Section I of this policy. **Exam accommodation requests must be renewed each semester.** Depending on the nature of the disability, new or updated documentation may be required. **Any student who arrives at an exam that does not provide the applicable modifications must notify the proctor at that time. This will allow the law school to provide proper accommodations. Any student who does not follow this procedure and takes the exam without notifying the proctor will not be allowed to contest the accommodations provided/not provided.**

Please note that accommodations provided for the bar examinations may not be the same accommodations as those provided by the Law School. Inquiries concerning accommodations for the Texas Bar Examination may be directed to:

State Board of Law Examiners  
510 South Congress Avenue South 116  
Austin, Texas 78711  
(512) 463-1621 [www.ble.state.tx.us](http://www.ble.state.tx.us)

**D. Parking**

There are several accessible parking spaces in the front of the law school and East Garage near the Law School for individuals who have state issued handicap parking designations.

**E. Accessible Restrooms**

All restrooms in the law school are accessible to students with disabilities.

**F. Classrooms**

All classrooms are accessible. For this reason, students with mobility impairments are requested to advise the Assistant Dean for Student Development as early as possible.

**G. Housing**

There are several choices of accessible housing on campus, including both dormitory and apartment living. For information on housing, contact 713-313-7205.

**H. Modification of Policies and Practices**

Class attendance is generally deemed to be a fundamental aspect of legal education. For that reason, faculty members are not expected to waive attendance policies for students with disabilities. The Office of Student Affairs will not issue excused absences.

### **III. Academic Dismissal & Readmission**

Students who are academically dismissed sometimes raise a disability as the basis for the academic difficulty. Unless an academically dismissed student timely applied for accommodations, presented appropriate documentation, and demonstrated that the law school either denied accommodations or provided insufficient accommodations, he will not be readmitted. Students with complaints should follow the procedure under Section IV. Grievances.

#### **IV. Grievances**

Texas Southern University has adopted an internal complaint procedure providing prompt and equitable resolution of complaints alleging any action prohibited by the Title II of the ADA and/or Section 504 of the Rehabilitation Act.

All complaints concerning the law school should be addressed to the Assistant Dean for Student Development at:

Office of the Dean  
Mrs. Rita Johnson, Sr. Administrative Assistant  
Dean's Suite

The following steps explain the procedure in the School of Law:

- (1) A complaint should be filed in writing, contain the name and address of the person filing it, and briefly describe the alleged violation of the regulations.
- (2) A complaint should be filed within thirty (30) days after the complainant becomes aware of the alleged violation.
- (3) An investigation, as may be appropriate, shall follow a filing of complaint. The Assistant Dean for Student Development shall conduct the investigation. These rules allow for an informal but thorough investigation, affording all interested persons and their representatives, if any, an opportunity to submit evidence relevant to a complaint.
- (4) A written determination as to the validity of the complaint and a description of the resolution, if any, shall be issued by the Assistant Dean for Student Development and a copy forwarded to the complainant and the Dean of the Law School no later than fifteen (15) business days after its filing.
- (5) The Assistant Dean for Student Development shall maintain the files and records of the Texas Southern University Thurgood Marshall School of Law relating to the complaints filed.

- (6) The complainant can request an appeal of the case in instances where he or she is dissatisfied with the resolution. The request for appeal should be made within five (5) business days to:

Dannye Holley, Dean  
Thurgood Marshall School of Law  
3100 Cleburne Ave.  
Houston, Texas 77004

- (7) The right of a person to a prompt and equitable resolution of the complaint filed hereunder shall not be impaired by the person's pursuit of other remedies such as the filing of an ADA complaint with the responsible federal department or agency. Use of this complaint procedure is not a prerequisite to the pursuit of other remedies.
- (8) These rules shall be constructed to protect the substantive rights of interested persons to meet appropriate due standards and to assure that Texas Southern University complies with the ADA and implementing regulations.

If the complainant is dissatisfied with the determination by the law school, he/she may appeal within five (5) business days to

Dr. William Saunders, Assoc. Provost for Student Services  
Texas Southern University  
3100 Cleburne Avenue  
Recreational Center  
Houston, Texas

*See the university ADA/504 Policy, MAPP Policy 02.05.15*

## **V. Additional Information**

A list of addresses and phone numbers is provided. **(See Appendix "B")**

# APPENDIX

**“A”**

## **STUDENT APPLICATION FOR ADA/504 ACCOMMODATIONS**

I submit this application for accommodations under ADA/504 to the Office of the Assistant Dean for Student Development at **Texas Southern University Thurgood Marshall School of Law**.

Please read and initial each of the following statements.

1. \_\_\_\_ I will read the directions on the general application, fill in the requested information, and answer the questions to the best of my ability.
2. \_\_\_\_ I will submit a copy of the applicable directions for documentation to the appropriate licensed professional who makes my assessment and recommendation. (**Directions I** for Learning Disability, **Directions II** for Visual Disability, **Directions III** for Hearing Disability, **Directions IV** for Any Other Medical, Physical, or Mental Illness (Not Learning Disabilities, Attention Deficit Disorder, or Visual or Hearing Impairment), **Directions V** for Attention Deficit Disorders (ADD/ADHD).
3. \_\_\_\_ I will submit my original application and proper documentation to Dean Mouton’s office for evaluation.
4. \_\_\_\_ I will submit all applications and documentation in a timely manner to allow the law school sufficient time for evaluation and determination of accommodations.
5. \_\_\_\_ I understand that I will not receive accommodations until all of the above steps have been completed.

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**Instructions to Petitioner. File two original copies with Mrs. Johnson in the Dean’s Office. She will file stamp and initial the date she receives them, keep one original for the Dean’s Office, and return one to you. Please keep your copy for your records.**

### **OFFICE USE ONLY**

Date filed \_\_\_\_\_

Law School Administrator \_\_\_\_\_ Date \_\_\_\_\_

# TEXAS SOUTHERN UNIVERSITY

## THURGOOD MARSHALL SCHOOL OF LAW

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CONFIDENTIAL

### APPLICATION FOR ACCOMMODATIONS AND/OR SERVICES FOR STUDENTS WITH DISABILITIES

The University maintains a policy for students with disabilities in accordance with the American with Disabilities Act As Amended 2008 and amendments, and Section 504 of the Rehabilitation Act of 1973. Under these federal guidelines the University is obligated to:

1. Protect the civil rights of students with disabilities.
2. Protect the confidentiality and privacy of students with disabilities.
3. Provide reasonable accommodations and services to students with known disabilities, who are qualified to meet the requirements of the academic program, apart from the handicapping condition.

Under these federal guidelines the University is not obligated to:

1. Identify students with disabilities; the burden of proof is on the student to demonstrate the need for the requested accommodations.
2. Provide testing services the cost associated with demonstrating a need for requested accommodations is borne by the student.
3. Provide retroactive consideration for an exam retake, change in grade, readmission, or other such actions.
4. Provide accommodations that are not reasonable, place undue financial requirements of the program.
5. Provide accommodations or services to a person merely because he has been properly diagnosed as disabled or handicapped.

**The student must show a substantial limitation, of one or more major life activities. If an educational accommodation or service is requested, the student must show that the substantial limitation pertains to education.**

In order to comply with these regulations, the University has implemented the following:

1. All requests for accommodations and services will be reviewed on a case-by-case basis. The University may seek independent recommendations by a licensed educational diagnostician, or appropriate health care provider.
2. The University may request additional or updated documentation.
3. The University will notify students, in writing, as to the status of their requests for accommodations and services, within 30 school days of receipt of this completed application.
4. All requests for accommodations and services must be submitted, in full no later than the fourth week of the current semester, or as soon as the disability is known.
5. The University will provide, at no cost to the student, counseling services to help the student understand the University policies relating to the federal guidelines for students with disabilities.

Students must provide complete, candid, and realistic information concerning the nature of the disability, special needs, and may support services required. This information will be retained in a confidential manner by this department.

**Required General Application for ADA/504 Accommodations**

# APPLICATION FOR ACCOMMODATIONS

NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ DATE: \_\_\_\_\_

LOCAL ADDRESS:

Number and Street (Apt.) (City) (State) (Zip)

EMAIL ADDRESS: \_\_\_\_\_

PERMANENT ADDRESS: (if different from above)

Number and Street (Apt.) (City) (State) (Zip)

Local Phone #: \_\_\_\_\_ Permanent Phone #: \_\_\_\_\_

EMERGENCY CONTACT:

	Name	Phone #
Classification: 1L (§)	_____ 2L _____ 3L _____	Cumulative GPA: _____

Please return this completed form with the following attachments.

Your application will be considered once you have returned the applicable forms.

1. An official notice of testing accommodations granted for each standardized test you have taken with accommodations: SAT, ACT, LSAT.
2. A current report of your disability by a licensed professional. (See specific directions)
3. An official notice of accommodations you received at your undergraduate university.

What is the nature of your disability? \_\_\_\_\_

Have you received accommodations or services in the past? \_\_\_\_\_

If so, describe briefly, \_\_\_\_\_

If not, explain briefly why you did not receive them in the past, and why accommodations are needed now. \_\_\_\_\_

What assistance or accommodations do you believe you require? \_\_\_\_\_

**I HAVE READ AND UNDERSTAND THIS APPLICATION. BY SIGNING THIS FORM, I HEREBY GRANT THE LAW SCHOOL PERMISSION TO NOTIFY TEACHERS AND/OR ACADEMIC ADVISORS OF ANY ACCOMMODATIONS OR SERVICES GRANTED BY THIS DEPARTMENT.**

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

# ACCOMMODATIONS REQUEST FORM

(To be completed by student)

To be submitted in September for Fall Semester, January for Spring Semester, and first week of classes for Summer Semester.

Name \_\_\_\_\_ Date \_\_\_\_\_

SSN \_\_\_\_\_ Phone \_\_\_\_\_

Disability \_\_\_\_\_ Documentation \_\_\_\_\_

Accommodations Requested (Be as specific as possible)

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List all professors for the current semester:

Course                      Instructors                      Days and Times of Classes

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For administrative use only:

Accommodations

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# EXAMS ACCOMMODATIONS REQUEST FORM

(To be completed by student)

Name \_\_\_\_\_

Date \_\_\_\_\_

SSN \_\_\_\_\_

Phone \_\_\_\_\_

Disability \_\_\_\_\_

Documentation \_\_\_\_\_

Accommodation(s) Requested – i.e., extra time, space, etc. (Be as specific as possible)

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List all final exams for the current application:

Course

Instructors

Scheduled Exam

Date & Time

Approved

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**For administrative use only:**

**Accommodations**

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**TEXAS SOUTHERN UNIVERSITY  
THURGOOD MARSHALL SCHOOL OF LAW**  
3100 CLEBURNE  
**HOUSTON, TEXAS 77004**

**OFFICE OF STUDENT AFFAIRS**  
FAX 713 313 1049

**Telephone 713 313 7909**  
email [vmouton@tsulaw.edu](mailto:vmouton@tsulaw.edu)

**RELEASE OF INFORMATION**

In order to obtain information needed and/or information requested, I authorize the Office of Student Development to obtain/release information pertinent to me from/to the following:

- \_\_\_\_\_ Consultant
- \_\_\_\_\_ Faculty or other Texas Southern University Personnel  
(Specify) \_\_\_\_\_
- \_\_\_\_\_ Other agencies/organizations  
(Specify) \_\_\_\_\_
- \_\_\_\_\_ Individual(s)  
(Specify) \_\_\_\_\_

I recognize that confidentiality of information is maintained and that only that which is absolutely necessary and appropriate will be shared with others.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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Permission Revoked:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

# DIRECTIONS I

## DIRECTIONS FOR DOCUMENTATION OF A LEARNING DISABILITY

### *FROM YOUR UNDERGRADUATE SCHOOL*

If your Disability was diagnosed while you were in undergraduate school, call or write your Accommodations Department and request:

1. A copy of accommodations you received while enrolled there.

### *FROM OUTSIDE TESTING AGENCIES*

An official notice of testing accommodations granted for the LSAT test if you received accommodations.

### *IF RECORDS ARE NOT FROM YOUR UNDERGRADUATE SCHOOL OR YOU WERE NOT PREVIOUSLY DIAGNOSED WITH A LEARNING DISABILITY:*

You must submit a comprehensive, individualized, Psycho-Educational Evaluation. Share this page with the person who conducts the evaluation.

What is it? A 4-6 hour battery of tests and information about you.

Who conducts it? A professional trained in evaluating Adolescent or Adult Learning Disabilities, such as a school Psychologist or Educational Diagnostician.

What tests are given? An **IQ** test such as the Wechsler Adult Intelligence Tests **Standardized, individualized, achievement tests** in Reading Comprehension, Reading Decoding, Written Expression for Content and Mechanics, Math Reasoning and Computation, Listening, and Speaking. Screening Devices such as the Wide Range Achievement Test are unacceptable.

Where can I go? Many private psychologists and learning clinics offer these services. The office of disabled students can also give you referrals.

What must be in the report in order to obtain accommodations?

1. Background information: developmental history, medical history, primary language dominance, past and current academic functioning, previous evaluations, and a history of services for disabilities. This information can be gathered from previous evaluations, self-reports, report cards, and transcripts.
2. All standardized test scores and subtest scores, including percentiles.
3. Interpretation of tests results.
4. A specific diagnosis of Learning Disabilities based on a significant discrepancy (of more than 15 points) between the IQ score and one of the Achievement test scores. The diagnosis must rule out alternative explanations, such as language differences for students who speak English as a Second Language. A discussion of co-existing diagnoses and the way alternative explanations were ruled out.
5. A clear and specific statement of how the Learning Disability substantially impairs work and learning, documented by the information in the evaluation.
6. Suggested accommodations, with a specific rationale for each. Educational documentation must be cited for educational accommodations. Thus, a math disability will not provide a need for additional time to write an essay.

**RECOMMENDED NONSTANDARD CLASSROOM  
AND/OR TESTING ACCOMMODATIONS**

**Students Name:** \_\_\_\_\_

Check all accommodations you believe are necessary for this student.

- \_\_\_\_\_ specified seating (front, back, middle, end in a classroom)
- \_\_\_\_\_ restroom breaks if necessary (classes are about 50 minutes in length)
- \_\_\_\_\_ other (specify \_\_\_\_\_)
- \_\_\_\_\_ braille version of exam of books
- \_\_\_\_\_ enlarged print of exam (12 pt. Font is used)
- \_\_\_\_\_ use of magnifying glass
- \_\_\_\_\_ other special devices (specify \_\_\_\_\_)
- \_\_\_\_\_ reader
- \_\_\_\_\_ special assistance in gridding scantron
- \_\_\_\_\_ additional testing time
- \_\_\_\_\_ sign language interpreter
- \_\_\_\_\_ audio cassette version of exam
- \_\_\_\_\_ separate testing area (section of classrooms, separate room if available)
- \_\_\_\_\_ breaks (specify \_\_\_\_\_)
- \_\_\_\_\_ food or drinks during exam
- \_\_\_\_\_ medication during exam
- \_\_\_\_\_ water during exam
- other: \_\_\_\_\_

I understand that this completed **Form I** must be filed by the student in order to receive accommodations in the classroom and/or exams.

**I certify that the information provided by me on this form is true and correct to be the best of my knowledge.**

**I understand that a representative from Texas Southern University Thurgood Marshall School of Law may contact me for clarifications of my responses on this form.**

\_\_\_\_\_  
**Signature of Licensed Physician/Licensed Professional**

\_\_\_\_\_  
**Date**

## **DIRECTIONS II**

### **DIRECTIONS FOR DOCUMENTATION OF A VISUAL DISABILITY**

**MANDATORY: FROM YOUR HEALTH CARE PROVIDER, MEDICAL DOCTOR, OPHTHOMOLOGIST OR OPTOMETRIST: (Show this form to the evaluator)**

1. A “State of Texas Interagency EYE EXAMINATION REPORT” dated within the past 12 months.
2. A “Functional Vision” evaluation dated within the past 12 months. This evaluation should specifically address functional implications with and without correction.

**TO THE HEALTH CARE PROVIDER;**

According to legal standards, documentation must be very thorough in order to secure accommodations under federal guidelines for Americans with Disabilities. Even if a student is diagnosed with a disability, accommodations cannot be granted without proper documentation. The evaluation must describe a substantial limitation of major life activities to this person. The evaluator must show that the substantial limitation pertains directly to the educational accommodation or service is requested.

**FROM YOUR UNDERGRADUATE SCHOOL:**

MANDATORY: If your Visual Impairment occurred while you were in undergraduate school, call or write your Accommodations Department and request:

1. A “Learning Media Assessment” with recommended assistive technology.
2. A copy of accommodations you received while attending your undergraduate school.

**FROM AN OUTSIDE SETTING, SUCH AS TEXAS COMMISSION FOR THE BLIND:**

Forward copies of any assessments completed since your graduation from undergraduate school. An outside evaluator, such as the Texas Commission for the Blind may have conducted these assessments.

**FROM OUTSIDE TESTING AGENCIES:**

An official notice of testing accommodations granted for the LSAT if you received accommodations.

**RECOMMENDED NONSTANDARD CLASSROOM  
AND/OR TESTING ACCOMMODATIONS**

**Students Name:** \_\_\_\_\_

Check all accommodations you believe are necessary for this student.

- \_\_\_\_\_ specified seating (front, back, middle, end in a classroom)
- \_\_\_\_\_ restroom breaks if necessary (classes are about 50 minutes in length)
- \_\_\_\_\_ other (specify \_\_\_\_\_)
- \_\_\_\_\_ braille version of exam of books
- \_\_\_\_\_ enlarged print of exam (12 pt. Font is used)
- \_\_\_\_\_ use of magnifying glass
- \_\_\_\_\_ other special devices (specify \_\_\_\_\_)
- \_\_\_\_\_ reader
- \_\_\_\_\_ special assistance in gridding scantron
- \_\_\_\_\_ additional testing time
- \_\_\_\_\_ sign language interpreter
- \_\_\_\_\_ audio cassette version of exam
- \_\_\_\_\_ separate testing area (section of classrooms, separate room if available)
- \_\_\_\_\_ breaks (specify \_\_\_\_\_)
- \_\_\_\_\_ food or drinks during exam
- \_\_\_\_\_ medication during exam
- \_\_\_\_\_ water during exam
- other: \_\_\_\_\_

I understand that this completed **Form II** must be filed by the student in order to receive accommodations in the classroom and/or exams.

**I certify that the information provided by me on this form is true and correct to be the best of my knowledge.**

**I understand that a representative from Texas Southern University Thurgood Marshall School of Law may contact me for clarifications of my responses on this form.**

\_\_\_\_\_  
**Signature of Licensed Physician/Licensed Professional**

\_\_\_\_\_  
**Date**

## **DIRECTIONS III**

### **DIRECTIONS FOR DOCUMENTATION OF A HEARING DISABILITY**

**MANDATORY: FROM YOUR HEALTH CARE PROVIDER, MEDICAL DOCTOR, OTOLOGIST OR AUDIOLOGIST: (Show this form to the evaluator)**

1. Please submit an audio logical and ontological evaluation dated within the past 12 months.
2. Include aided thresholds; specifically addressing functional implications with and without amplification.

**TO THE HEALTH CARE PROVIDER;**

According to legal standards, documentation must be very thorough in order to secure accommodations under federal guidelines for Americans with Disabilities. Even if a student is diagnosed with a disability, accommodations cannot be granted without proper documentation. The evaluation must describe a substantial limitation of one or more major life activities. The evaluator must show that the substantial limitation pertains directly to the educational accommodation or service is requested.

**FROM YOUR UNDERGRADUATE SCHOOL:**

**MANDATORY:** If your Hearing Impairment occurred while you were in undergraduate school, call or write your Accommodations Department and request:

1. Special Education Comprehensive Testing, including educational, intellectual and achievement test results for undergraduate school.
2. Speech and Language Assessments from undergraduate school.

**FROM AN OUTSIDE AGENCY:**

Forward copies of any assessments completed since your graduation from undergraduate school. an outside evaluator, such as the Texas Rehabilitation Commission, or another agency may have conducted these assessments.

**FROM OUTSIDE TESTING AGENCIES:**

An official notice of testing accommodations granted for the LSAT if you received accommodations.

Include a copy of the most recent audiogram and any other reports which provide additional related information.

**RECOMMENDED NONSTANDARD CLASSROOM  
AND/OR TESTING ACCOMMODATIONS**

**Students Name:** \_\_\_\_\_

Check all accommodations you believe are necessary for this student.

- \_\_\_\_\_ specified seating (front, back, middle, end in a classroom)
- \_\_\_\_\_ restroom breaks if necessary (classes are about 50 minutes in length)
- \_\_\_\_\_ other (specify \_\_\_\_\_)
- \_\_\_\_\_ braille version of exam of books
- \_\_\_\_\_ enlarged print of exam (12 pt. Font is used)
- \_\_\_\_\_ use of magnifying glass
- \_\_\_\_\_ other special devices (specify \_\_\_\_\_)
- \_\_\_\_\_ reader
- \_\_\_\_\_ special assistance in gridding scantron
- \_\_\_\_\_ additional testing time
- \_\_\_\_\_ sign language interpreter
- \_\_\_\_\_ audio cassette version of exam
- \_\_\_\_\_ separate testing area (section of classrooms, separate room if available)
- \_\_\_\_\_ breaks (specify \_\_\_\_\_)
- \_\_\_\_\_ food or drinks during exam
- \_\_\_\_\_ medication during exam
- \_\_\_\_\_ water during exam
- other: \_\_\_\_\_

I understand that this completed **Form III** must be filed by the student in order to receive accommodations in the classroom and/or exams.

**I certify that the information provided by me on this form is true and correct to be the best of my knowledge.**

**I understand that a representative from Texas Southern University Thurgood Marshall School of Law may contact me for clarifications of my responses on this form.**

\_\_\_\_\_  
Signature of Licensed Physician/Licensed Professional

\_\_\_\_\_  
Date

\_\_\_\_\_  
License or Certificate Number

## **DIRECTIONS IV**

### **DIRECTIONS FOR DOCUMENTATION MEDICAL, PHYSICAL, OR MENTAL ILLNESS NOT: LEARNING DISABILITIES, ATTENTION DEFICIT DISORDER, OR VISUAL OR HEARING IMPAIRMENT**

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#### **MANDATORY: EVALUATION FROM YOUR HEALTH CARE PROVIDER**

1. An updated medical report from the Health Care Provider documenting, in detail, the current disability or condition.
2. If applicable, the Physician should describe medication prescribed for this disability, and how this medication affects the student, including significant side effects.
3. According to legal standards, the written report for the documentation must be very thorough in order to secure accommodations under federal guidelines for accommodations cannot be granted without proper documentation. The evaluation must describe a substantial limitation of one or more major life activities. The evaluator must show that the substantial limitation pertains directly to the educational accommodation or service is requested. Thus, a diagnosis of a physical disease such as Epilepsy or a mental illness such as Bi-Polar disorder may not automatically warrant accommodation such as extra time on tests.
4. If the disability has been identified for the first time, and the student has not previously received accommodations, further testing may be required, including educational testing to document a need for educational accommodations.

#### **FROM YOUR UNDERGRADUATE SCHOOL:**

**MANDATORY:** If your Disability occurred while you were in undergraduate school, call or write your Accommodations Department and request:

1. A copy of accommodations you received while enrolled there.

#### **FROM AN OUTSIDE AGENCY:**

Forward copies of any assessments completed since your graduation from undergraduate school. An outside evaluator, such as the Texas Rehabilitation may have conducted these assessments.

#### **FROM OUTSIDE TESTING AGENCIES:**

An official notice of testing accommodations granted for the LSAT if you received accommodations.

**RECOMMENDED NONSTANDARD CLASSROOM  
AND/OR TESTING ACCOMMODATIONS**

**Students Name:** \_\_\_\_\_

Check all accommodations you believe are necessary for this student.

- \_\_\_\_\_ specified seating (front, back, middle, end in a classroom)
- \_\_\_\_\_ restroom breaks if necessary (classes are about 50 minutes in length)
- \_\_\_\_\_ other (specify \_\_\_\_\_)
- \_\_\_\_\_ braille version of exam of books
- \_\_\_\_\_ enlarged print of exam (12 pt. Font is used)
- \_\_\_\_\_ use of magnifying glass
- \_\_\_\_\_ other special devices (specify \_\_\_\_\_)
- \_\_\_\_\_ reader
- \_\_\_\_\_ special assistance in gridding scantron
- \_\_\_\_\_ additional testing time
- \_\_\_\_\_ sign language interpreter
- \_\_\_\_\_ audio cassette version of exam
- \_\_\_\_\_ separate testing area (section of classrooms, separate room if available)
- \_\_\_\_\_ breaks (specify \_\_\_\_\_)
- \_\_\_\_\_ food or drinks during exam
- \_\_\_\_\_ medication during exam
- \_\_\_\_\_ water during exam
- other: \_\_\_\_\_

I understand that this completed **Form IV** must be filed by the student in order to receive accommodations in the classroom and/or exams.

**I certify that the information provided by me on this form is true and correct to be the best of my knowledge.**

**I understand that a representative from Texas Southern University Thurgood Marshall School of Law may contact me for clarifications of my responses on this form.**

\_\_\_\_\_  
**Signature of Licensed Physician/Licensed Professional**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
License or Certificate Number

# DIRECTIONS V

## DIRECTIONS FOR DOCUMENTATION OF ATTENTION DEFICIT DISORDERS (ADD/ADHD)

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**FROM YOUR UNDERGRADUATE SCHOOL** If your Disability was diagnosed while you were in undergraduate school, request:

1. A copy of your last accommodations you received while attending there.
2. A copy of your last Admission, Review and Dismissal (ARD) meeting that describes classroom modifications implemented in your last educational setting.

### **FROM OUTSIDE TESTING AGENCIES:**

An official notice of testing accommodations granted for the LSAT if you received accommodations.

### **IF RECORDS ARE NOT FROM AN UNDERGRADUATE SCHOOL OR YOU WERE NOT PREVIOUSLY DIAGNOSED WITH ADD/ADHD:**

You must submit a comprehensive, individualized, Psycho-Educational Evaluation.

What is it?

A 4-6 hour battery of tests and information about you

Who conducts it?

A Professional trained in evaluating Adolescent or Adult ADD/ADHD and Learning Disabilities, such as a school Psychologist. Medical Psychiatrists are qualified to diagnose ADD/ADHD, but some do not conduct the educational component of the evaluation. Some clinics offer joint evaluations with two specialists, one for the medical component, and one for the educational component. The counseling office can also give you referrals. **Show this page to the person(s) conducting the evaluation.**

What tests are given? 1. An **IQ** test such as the Wechsler Adult Intelligence Test  
2. **Standardized, individualized, achievement tests** in Reading Comprehension, Reading Decoding, Written Expression for Content and Mechanics, Math Reasoning and Computation, Listening, and Speaking, Screening Devices such as Wide Range Achievement Test are unacceptable.

### **3. Formal and/or informal tests to diagnose ADD/ADHD**

What must be in the report in order to obtain accommodations?

1. Background information: developmental history, medical history, primary language dominance, past and current academic functioning, previous evaluations, and a history of services for disabilities. This information can be gathered from previous evaluations, self-reports, report cards, and transcripts.
2. All standardized test scores and subtest scores, including percentiles.
3. Interpretation of test results.
4. A specific diagnosis of ADD/ADHD, as described in the DSM IV Manual; a discussion of coexisting diagnoses and the way alternative explanations were ruled out.
5. A clear and specific statement of how the ADD/ADHD substantially impairs work and learning, documented by the information in the evaluation.
6. Suggested accommodations, with a specific rationale for each. Properly substantiated, the University will not question a professional's diagnosis of a student's disability of ADD or ADHD. Nevertheless, the accommodations will not be provided without additional, specific documentation. For instance, the presence of distractibility will not automatically warrant accommodations such as extra time on examinations, without supporting data from the educational tests.

**RECOMMENDED NONSTANDARD CLASSROOM  
AND/OR TESTING ACCOMMODATIONS**

**Students Name:** \_\_\_\_\_

Check all accommodations you believe are necessary for this student.

- \_\_\_\_\_ specified seating (front, back, middle, end in a classroom)
- \_\_\_\_\_ restroom breaks if necessary (classes are about 50 minutes in length)
- \_\_\_\_\_ other (specify \_\_\_\_\_)
- \_\_\_\_\_ braille version of exam of books
- \_\_\_\_\_ enlarged print of exam (12 pt. Font is used)
- \_\_\_\_\_ use of magnifying glass
- \_\_\_\_\_ other special devices (specify \_\_\_\_\_)
- \_\_\_\_\_ reader
- \_\_\_\_\_ special assistance in gridding scantron
- \_\_\_\_\_ additional testing time
- \_\_\_\_\_ sign language interpreter
- \_\_\_\_\_ audio cassette version of exam
- \_\_\_\_\_ separate testing area (section of classrooms, separate room if available)
- \_\_\_\_\_ breaks (specify \_\_\_\_\_)
- \_\_\_\_\_ food or drinks during exam
- \_\_\_\_\_ medication during exam
- \_\_\_\_\_ water during exam
- other: \_\_\_\_\_

I understand that this completed **Form V** must be filed by the student in order to receive accommodations in the classroom and/or exams.

**I certify that the information provided by me on this form is true and correct to be the best of my knowledge.**

**I understand that a representative from Texas Southern University Thurgood Marshall School of Law may contact me for clarifications of my responses on this form.**

\_\_\_\_\_  
**Signature of Licensed Physician/Licensed Professional**

\_\_\_\_\_  
**Date**

**Appendix “B”**  
**For Additional Information**

Handicapped Lawyers Association  
Lawyers with Disabilities  
P.O. Box 934  
Mt. Angel, OR 97362

National Disabled Bar Association, Inc.  
659 Eager Rock Avenue  
West Orange, NJ 07052  
(201)736-6927

American Blind Lawyers Association  
1155 15<sup>th</sup> St. NW, Ste 1004  
Washington, DC 20005  
1-(202) 467-5081

National Association of Blind Lawyers  
Scott Labarre, President  
1660 South Albion Street, Ste. 918  
Denver, CO 80222-4046  
(303) 504-5979 Fax (303) 757-3640  
e-mail [slabarre@interfold.com](mailto:slabarre@interfold.com)

**Taped law casebooks and treaties are available from:**

Recording for the Blind Inc.  
20 Roszel Road  
Princeton, NJ 08540  
(609) 452-0606

**For information on substance addiction issues:**

ABA Commission on Impaired Attorneys  
541 N. Fairbanks CT. 14<sup>th</sup> Floor  
Chicago, IL 60611-3314  
(312) 988-5312

HBA Peer Assistance Committee  
David A. Hannah, Chair  
Williams Birnberg & Andersen, L.L.P.  
6671 Southwest Freeway, Suite 303  
Houston, Texas 77074-2209  
(713) 981-9595

Texas Lawyers' Assistance Program  
State Bar of Texas  
P.O. Box 12487, Capitol Station  
Austin, Texas 78711  
(800) 343-8527

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**Current information on AIDS issues can be obtained from:**

Task Force on AIDS  
American College Health Association  
P.O. Box 28937  
Baltimore, MD 21240-8937  
(410) 859-1500

**Organization for deaf and hearing impaired lawyers**

NORCAL Center on Deafness  
1820 Tribute Rd Ste A  
Sacramento, CA 95815  
(916) 921-1045 (Voice/TDD)

**For other resource information**

**HEATH Resource Center**

2121 K Street, NW Suite 220  
Washington, DC 20037

**Organization committed to the full participation of individuals with disabilities in college life:**

Association for Higher Education and disability (AHEAD)  
University of Massachusetts Boston  
100 Morrissey Boulevard  
Boston, MA 02125-3393  
(617) 287-3880

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**TEXAS SOUTHERN UNIVERSITY  
THURGOOD MARSHALL SCHOOL OF LAW  
3100 CLEBURNE AVENUE  
HOUSTON, TEXAS 77004  
(713) 313-4468**

I \_\_\_\_\_ (print name) hereby certify that I have read a copy of the Texas Southern University Thurgood Marshall School of Law 2015-2016 **STUDENT ACCOMMODATIONS HANDBOOK**. I understand that a copy of this handbook will remain on the law school's website under Student Affairs and that it is my responsibility to refer to this handbook and contact the Assistant Dean for further assistance.

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**Signature**

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**Date**

**This Form to be Filed in the Office of Student Affairs**

**TEXAS SOUTHERN  
UNIVERSITY**

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**THURGOOD  
MARSHALL SCHOOL  
OF LAW**

**STUDENT  
ACCOMMODATIONS**

**2015-2016**

**IN ACCORDANCE WITH  
§ 504 OF THE  
REHABILITATION ACT  
AND THE AMERICANS  
WITH  
DISABILITIES ACT  
AND AMENDMENTS**

***IDENTIFYING THE NEED  
FOR ACCOMMODATIONS***

*Virgie Mouton  
Assistant Dean for Student  
Development*

*Dannye Holley  
Dean*