



**Student Accommodations and Support Services**  
Documentation Guiding Principles  
**Psychiatric Diagnosis Form**

**Documentation Process and Recommendations:** The Office of Student Accommodations and Support Services (SASS) provide academic services and accommodations for students with diagnosed disabilities. The documentation provided regarding the disability diagnosis must demonstrate a disability covered under Section 504 of the Rehabilitation Act of 1973 and Title II of the Americans with Disabilities Act (ADA) of 1990. **The ADA defines a disability as a physical or mental impairment that substantially limits one or more major life activities.**

Student Accommodations and Support Services will review and consider all documentation submitted. Documentation will assist SASS in understanding how the disability impacts the student in an academic setting and the current impact of the disability as it relates to the accommodations requested. Reviewing documentation is an individualized process and each piece of documentation is handled on a case-to-case basis. The eligibility determination process is not a same day process. Once documentation is received, it will be reviewed in order of receipt; therefore, it is recommended that documentation be submitted well in advance of any accommodation related needs. The student will be contacted by an e-mail to their Elms College e-mail address once the documentation has been reviewed. Upon receipt of this email the student is required to meet with the SASS Director for a welcome/intake appointment to be considered fully registered with the office.

**Completion of the SASS Intake Process and providing supporting documentation form does not indicate request approval.**

There are multiple ways to provide SASS with documentation of your disability diagnosis. This documentation should be completed or provided from a treating or diagnosing healthcare professional (psychologist, psychiatrist, counselor, therapist, social worker, medical doctor, optometrists, speech-language pathologists, etc.). The various methods are explained below:

1. A full detailed evaluation or diagnostic report would provide the richest information to determine the best possible accommodations and supports.
2. A report that provides proof of prior accommodations.
  - A. Individualized Education Plan/ 504 Plan/ Evaluation Team Report.
  - B. Documentation that illustrates past use of postsecondary accommodations.
3. SASS has provided a Psychiatric Diagnosis Form that can be completed by the healthcare professional. It is important to note that the SASS office may require completion of the SASS Psychiatric Diagnosis Form.
4. A healthcare professional can submit a letter of their own; but it is important to note that the SASS office may require a mental health provider to complete the SASS Psychiatric Diagnosis Form in addition to the letter. A letter from a healthcare must include the following information:
  - A. The letter must be addressed to SASS, written on agency or provider letterhead, include the date the letter was written, the providers written name, the providers signature
  - B. A diagnostic statement identifying the disability (with the date of diagnosis).

- C. Severity of the disorder (mild/moderate/severe).
- D. Medication or treatment currently prescribed.
- E. An assessment of major life activities that are affected by the impairment (concentration, memory, social interactions, class attendance, learning, reading, thinking, etc.)
- F. Recommended accommodations that may assist the student in minimizing the impact of the condition in an academic setting (examples: test taking, class attendance, taking notes, understanding materials, speaking, comprehension, transportation, housing, etc.)
- G. Include test scores when applicable.

### **Learning Disability Documentation Guidelines:**

Students with learning disabilities must provide SASS with documentation that meets general documentation guidelines established by this office.

Described below is a preferred documentation profile for individuals with learning disabilities who are requesting accommodations or academic support services. This type of documentation is most useful in providing information to support educational planning and anticipate future accommodation needs.

#### **All documentation will be evaluated on a case-by-case basis.**

- A comprehensive psycho-educational test battery, which means intelligence/ability testing and educational/achievement testing are recommended. A full diagnostic report, including all standard test scores as well as subtest scores and the evaluator's narrative, is recommended. If you are providing information from a public school, include the most recent Comprehensive Evaluation (i.e. Multi-factored Evaluation) and Individual Educational Program (IEP) and the original eligibility evaluation as well as any other MFE's that include the results of a psycho-educational test battery. These documents alone may or may not provide adequate information to document the learning disability.
- A diagnosis made by (a) qualified professional(s) i.e., licensed school psychologist, licensed psychologist, learning disabilities/educational specialist is suggested. The learning disability diagnosis must be clearly stated. References to academic weaknesses and learning differences alone may not substantiate a learning disability diagnosis.
- Assessments normed for adults are preferred. What this means is that your assessments should not be assessments for children, but rather tests that are designed for adults, i.e. WAIS-III rather than WISC-III
- A diagnosis of a learning disability and type(s) of learning disability (ies), which should be supported by test data and a description of current functional limitations are important. Psycho-educational testing completed within the last three years provides a better assessment of current functional limitations.
- Suggestions for appropriate accommodations are helpful. It is important that these suggestions are based upon functional limitations. If it is not evident why an accommodation is suggested by assessing test scores and resulting functional limitations, then a rationale for the accommodations is necessary.
- Along with the above information, transfer students are encouraged to provide written verification from the previously attended school, which includes the dates served and the accommodations used.



Student Accommodations & Support Services  
Alumnae Library  
Telephone: 413-265-2333  
Email: [hendersont@elms.edu](mailto:hendersont@elms.edu)  
Director, Tynisha Henderson

### Psychiatric Diagnosis Form

**Documentation Information:** In order to establish that a student is an “otherwise qualified student with a disability,” the Director of Student Accommodations and Support Services of Elms College, in accordance with the Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973, is requesting documentation of a student’s disability. The student has requested services and accommodations related to his/her psychiatric diagnosis. **The ADA defines a disability as a physical or mental impairment that substantially limits one or more major life activities.**

#### Form Directions:

- This form is to be completed by a licensed professional or a certified diagnostician.
- Please complete the following form in order to document that this student Has a disability; **according to the ADA a disability is defined as a physical or mental impairment that substantially limits one or more major life activities.** Major life activities can be described as functions such as breathing, seeing, hearing, speaking, walking, learning, working, performing manual tasks and caring for oneself.
- Thoroughly answer all questions, as this will assist the Director of Student Accommodations and Support Services in working with the student and faculty in obtaining reasonably requested accommodations. If more room is required please feel free to attach additional information on letterhead.

Thank you for your assistance.



Student Accommodations & Support Services  
Alumnae Library  
Telephone: 413-265-2333  
Email: [hendersont@elms.edu](mailto:hendersont@elms.edu)  
Director, Tynisha Henderson

NAME OF STUDENT: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

- 1.) Diagnosis (es) – Include DSM classification. Indicate the onset, frequency and severity of the condition and your evidence that the student’s disability will pose a substantial limitation on learning and/or other major life activity related to college or their degree program.
  - a.) Diagnosis:
  - b.) Date of Diagnosis:
  - c.) Date of last contact with student:
  - d.) Approximate date or timeframe for next contact, or frequency of review (if known):
  - e.) Severity:
  - f.) Prognosis:
  - g.) Substantial limitation on learning and/or other major life activity related to college or their degree program:
  - h.) Additional Supportive Information:



Student Accommodations & Support Services  
Alumnae Library  
Telephone: 413-265-2333  
Email: [hendersont@elms.edu](mailto:hendersont@elms.edu)  
Director, Tynisha Henderson

2.) Describe the symptoms supporting the diagnosis. If tests were administered in the diagnostic process, please include a copy of the report including the name of the tests, the student scores, and a brief interpretation of the student's performance on the tests. (*Testing information is a requirement for all learning disability diagnosis*).

3.) Please describe how the student's disability may affect his/her academic and social performance at Elms College.

4.) List any current medications and any adverse side effects that have been experienced by the student and/or that may be experienced by the student.

a.) Does this medication need to be monitored locally?

b.) Does this student continue to need accommodations when utilizing any recommended medications?

5.) What recommendations do you have regarding accommodations for this student?

a.) if it has not been covered in your answer above, please explain how you think that these accommodations will directly affect the student's academic and/or social limitations and why you feel the accommodations you are recommending are justified for this student.



Student Accommodations & Support Services  
Alumnae Library  
Telephone: 413-265-2333  
Email: [hendersont@elms.edu](mailto:hendersont@elms.edu)  
Director, Tynisha Henderson

6.) Please provide any history and/or chronological information that are relevant to the student’s disability.

a.) Is there any other information that you feel is either relevant and/or important for the Director of Student Accommodations and Support Services at Elms College to know so as to better understand and more fully advocate for this student? If so, please place this information below.

**Certification of Qualified Professional Completing this form:**

\_\_\_\_\_  
Signature Date

Printed Name \_\_\_\_\_ Title \_\_\_\_\_ License Number \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

**Dear Provider, An original signature is required; you may forward the completed document electronically, but please mail the original via U. S. postal mail.**

Tynisha Henderson  
Director of Student Accommodations and Support Services  
Elms College  
Alumnae Library  
291 Springfield Street  
Chicopee, MA 01013  
Phone: (413) 265-2333  
Fax: (413-594-3951)