

University of Saint Francis
Fort Wayne, Indiana
Disability Services
Student Registration Form

Student Academic Support Services Office
Pope John Paul II Center Room 210
2701 Spring Street
University of Saint Francis, Fort Wayne, IN 46808

260-399-8065
www.sf.edu

Instructions: Please complete this form in its entirety and submit it to Student Academic Support Services. Submitting this completed form is the first step in registering with Disability Services. Information provided is confidential and only shared with your permission.

Name _____ Today's Date _____

Student ID # _____ Birth Date _____

Home Address _____ Home Phone _____

City State Zip

Campus/Local Address _____ Cell Phone _____

Email _____@cougars.sf.edu Alt Email _____

Major _____ Did you transfer to USF? If yes, from what college or university?

Please state your disability/medical condition:

Please describe how your disability/medical condition currently affects you both outside and inside the classroom.

Are you taking medications? If yes, please list:

Describe adverse effects, if any:

Please identify any other condition(s) affecting school that you would like to discuss:

Describe services that you have had in the past that you are requesting at USF:

Functional Limitations: Please check any of the major life activities listed below that you believe are affected as a result of your diagnosed condition. Please indicate the level of limitation you believe you experience as a result of the condition.

1 – Not Applicable 2 – Mild 3 - Substantial

	1	2	3
Attending Class			
Breathing			
Hearing			
Eating			
Seeing			
Interacting w/others			
Learning			
• Reading			
• Writing/Spelling			
• Calculating			
• Memorizing			
• Concentrating			
• Listening			
Lifting/Carrying			
Managing Distractions			
Managing Stress			
Sitting/Walking/Standing			
Organization			
Performing Manual Tasks			
Other:			

In an emergency situation, would you require assistance due to your disability or medical condition?

(i.e. Would you need help physically getting to a safe place? Are you dependent on insulin or medication that you would not be able to go without for an extended time frame?)

Yes _____ No _____

Disability Services Records:

Student disability records are maintained for five (5) years from when you leave the University of Saint Francis. If you leave the university and then return, you will need to reactivate your active status with the Student Disability Office by completing a new registration form.

Disability records are confidential and are kept in a secure location. Disability records are never a part of a student's academic record.

Disability Services Office Student Receipt of Information:

I have access to the Student Disability Services Office Student Handbook which is found on the Student Disability Services page on the USF website. I understand that I am responsible for all of the information regarding the Disability Services policies and procedures.

I understand that to complete my registration with Disability Services, I must provide documentation of my disability and meet with a disability representative from Student Academic Support Services (SASS).

Student Signature _____ Date _____