THE COLLEGE OF
WOOSTER

Medical Accommodation Application

Applications Due—February 13
Decisions announced—February 17

Full Name:_____ Class Year:_____

Email address: _____ Student ID:_____

Contact Number: _____ Gender:_____ Campus Box:_____

Building Preference (final decision will be based on availability/need):

_____

Understand that accommodations may require a student to reside in a facility that meets their need, however, we will take into consideration your interest in our various housing options/themes:

- ☐ Greek Housing
- ☐ Independent Student Housing
- ☐ First-Year Center
- ☐ Language Suite
- ☐ Cross Cultural Connections
- ☐ Program Houses

Students seeking a single room accommodation must either qualify under ADA guidelines for an accommodation or apply for a single room through the Housing Process held during the spring of each year. If you meet the ADA guidelines, please contact Amber Larson, the College's student ADA Coordinator, to complete the appropriate documentation.

In addition to this application, you must submit the following information:

A. A written statement from the student explaining the basis for the request.

B. Supporting Documentation of a medical or mental health basis of the request as outlined above from a primary health care provider. **Medical documentation of a condition that is the basis of the request. This documentation should be at least a page in length from the primary care provider describing the condition, health or mental health situation, length of treatment, types of on-going treatment the student is pursuing as well as rationale for why this requested accommodation would be appropriate.**

"I agree to allow the necessary College of Wooster staff to review my documentation in order for my medical accommodation request to be evaluated."

Signed:_____ Date:_____