



## Student Accessibility Services Student Information Form

DATE:			
CONTACT INFORMATION			
First Name:	Middle Initial:	Last Name:	
Street Address (local):	City:	State:	Zip Code:
<input type="checkbox"/> Check if local and permanent address are the same.			
Street Address (permanent):	City:	State:	Zip Code:
Phone:	Kent State Email Address:		
Do you receive Vocational Rehabilitation Services through BVR or BSVI? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, who is your counselor? _____			
Are you a registered voter? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you a Military Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No			
STUDENT INFORMATION			
Have you applied to Kent State University at Trumbull? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been admitted to Kent State University at Trumbull? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Are you currently enrolled in courses?

Yes       No

Are you a transfer student from another institution?

Yes       No

What degree are you seeking?

Undergraduate       Graduate       Post-Undergraduate

How many credits have you completed?

0-29       30-59       60-89       90+

What is your major?

Please state the nature of your disability(ies).

Please describe how your disability(ies) may impact your academic performance.

Please describe the accommodations you have previously used in an academic setting.

Please describe any concerns you may have.

I understand that submitting this form does not complete my registration with Student Accessibility Services.

Yes                      Student Signature: \_\_\_\_\_

I understand that in order to complete my registration with the office of Student Accessibility Services I must complete the following:

- Schedule and attend a registration appointment with Elaine Shively, Coordinator, Academic and Student Accessibility Services, Kent State at Trumbull, (330) 675-8932, [eshively@kent.edu](mailto:eshively@kent.edu).
- Provide documentation of my disability that meets Student Accessibility Services disability documentation requirements.

Yes                      Student Signature: \_\_\_\_\_