

Office Of Student Accessibility  
student.accessibility@massart.edu  
T: (617) 879-7253  
F: (617) 879-7240

The Office of Student Accessibility at MassArt provides services and resources to support instruction, enhance student academic success and retain a diverse student body. Through the Office of Student Accessibility and in accordance with the Americans with Disabilities Act (ADA), Amendments Act (ADAA) of 2008, MassArt is committed to providing reasonable accommodations to students with documented disabilities.

Requests for accommodations should be made prior to the start of the semester to ensure a timely provision of services and should be accompanied with supporting documentation. Guidelines for documenting a disability are available at the Academic Resource Center and on the Student Accessibility website at [www.massart.edu/student-accessibility](http://www.massart.edu/student-accessibility).

### Part I: Student Information

Chosen Name: \_\_\_\_\_

Pronouns: \_\_\_\_\_ Student ID: \_\_\_\_\_ Date Entering MassArt: \_\_\_\_\_

Phone: \_\_\_\_\_ MassArt Email: \_\_\_\_\_

Street Address (include apt. #): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

#### Student Status (check one):

First Year  Transfer  Current Student  Graduate, Professional & Continuing Education

### Part II: Disability & Access Needs

This information helps us better understand your experience and support your needs.

#### What is the nature of your diagnosed disability?

(check all that apply)

Learning Disability  ADD/ADHD  Psychiatric/Mental Health Condition

Autism Spectrum  Mobility Impairment  Medical/Physical Illness or Health Condition

Visual Impairment/Low Vision  Auditory Impairment/Deaf  Other: \_\_\_\_\_

**How does your disability(ies) affect you in daily life and functioning in school?**

(For example: concentration, processing, mobility, attendance, communication, etc.)

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**What strategies, supports, or accommodations have been helpful for you in the past?**

(Example: assistive technology, extended time, devices, treatment or medication, reasonable accommodations, and/or compensatory strategy that reduces the impact of your disability(ies).

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**Are you currently taking any medication related to your disability(ies) or medical condition(s)?**

Yes  No

**If yes, are there any side effects or health-related factors that may impact your academic experience that you'd like us to consider?**

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**Part III: Previous Accommodations**

**Please share any services/accommodations you received at any high school or prior college:**

Note: Requesting accommodations, providing a clinician's recommendation, or having accommodations in the past does not guarantee a student will receive such accommodations at MassArt. The information on this form is to give ARC staff background information on your disability-related needs.

High School Attended: \_\_\_\_\_ Years Attended: \_\_\_\_\_

Accommodations Received: \_\_\_\_\_

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College Previously Attended (if applicable): \_\_\_\_\_ Years Attended: \_\_\_\_\_

Accommodations Received: \_\_\_\_\_

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## Part IV: Accommodation Requests

**Please indicate below any reasonable academic accommodations that you may be requesting in the classroom or studio:**

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**If you are requesting housing-related accommodations, please indicate your needs below:**

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The above information is complete and accurate to the best of my knowledge and belief. I understand I may be asked to supply additional information in order for Massachusetts College of Art and Design to fulfill the accommodation request.

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

\_\_\_\_\_  
Date

**Please return this form along with all supporting medical documentation to:**

student.accessibility@massart.edu

### Questions?

Please contact:

Matt Tragert, Assistant Director of Student Accessibility

mtragert@massart.edu

(617) 879-7253