UNIVERSITY OF WISCONSIN OSHKOSH

CRITERIA FOR DOCUMENTING MEDICAL DISABILITIES AND ACUTE/CHRONIC HEALTH CONDITIONS

In order to review your request for reasonable accommodation, we need to receive the following information from your medical care provider:

- Diagnostic statement
- Descriptive history of medical condition
- Current status and treatment protocol. Include information concerning prescribed medications and/or treatment schedules that may influence the types of academic accommodations provided and potential side-effects of medications that could also affect accommodation planning.
- Detailed description of functional limitations due to the diagnosed condition and those resulting as side effects of treatment and/or medication
- For conditions with sporadic flare-ups of symptoms, please describe typical symptoms and typical recovery time
- Identify the prognosis as short-term, long-term, or life-time condition
- Results of tests or evaluations used for diagnosis
- Additional elaboration or identification of specific challenges and impacts of the disability
- Specific recommendations for accommodations that are supported by test results or diagnostic evaluations

The information must be provided on the licensed psychologist, psychiatrist, licensed professional counselor, or licensed social worker's letterhead and must include a license number and signature. The documentation provided must be recent (within 3 years). Documentation may be mailed, emailed, or faxed to the Center for Accessibility & Disability Resources.

MAIL:

Center for Accessibility & Disability Resources
800 N Algoma Blvd.
Clow N201
Oshkosh, WI. 54901

FAX:

(920)424-1051

EMAIL:

accessibilitycenter@uwosh.edu