



**STUDY ABROAD ACCOMMODATIONS REQUEST FORM**

*This form can be filled out by the student when requesting ADA accommodations at The Chicago School for a study abroad or field experience trip. Please fill out the form fields in as much detail as possible. The completed form can be submitted to [accommodations@thechicagoschool.edu](mailto:accommodations@thechicagoschool.edu).*

STUDENT NAME: \_\_\_\_\_ STUDENT ID #: \_\_\_\_\_

STUDENT EMAIL: \_\_\_\_\_ PHONE #: \_\_\_\_\_

CAMPUS: \_\_\_\_\_ DEGREE LEVEL (BA, MA, Doctoral): \_\_\_\_\_ PROGRAM: \_\_\_\_\_

**Please answer the following questions as fully as possible (attach additional sheets if necessary):**

What is your disability, diagnosis, and/or symptom profile?

Due to the condition(s) mentioned above, what limitations do you have when completing day-to-day tasks and activities?

Based on your knowledge of the trip's itinerary, what obstacles do you foresee facing?

What accommodations do you and/or your treating professional recommend we implement on the trip to help you overcome those limitations mentioned above?

Is there any additional information you would like to provide to help the Office of Disability Services and the trip organizers?

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

Date: \_\_\_\_\_