



## ACCOMMODATION AND ACCESSIBILITY SERVICES (AAS)

Big Bend Community College is committed to ensuring its services, programs and facilities are accessible to individuals with disabilities. AAS provides accommodations and support services for students with documented disabilities. If you are interested in requesting services, please complete this form and return it to the AAS office, room 1472. Questions? Call 509.793.2027 TDD: 509.793.2325

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Student ID#: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Today's Date: \_\_\_\_\_

BBCC Start Date: ☐ SUMMER ☐ FALL ☐ WINTER ☐ SPRING YEAR: \_\_\_\_\_

### Check all disability categories that apply:

- |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> 1) Deaf/Hearing<br><input type="checkbox"/> (A) Deaf<br><input type="checkbox"/> (B) Severe to moderate hearing loss                                                | <input type="checkbox"/> 6) Chronic/Acute Health<br><input type="checkbox"/> (K) Cancer<br><input type="checkbox"/> (L) Cardiovascular/pulmonary<br><input type="checkbox"/> (M) Orthopedic conditions<br><input type="checkbox"/> (N) Organ, blood, gastrointestinal, connective tissue, immune disorders |
| <input type="checkbox"/> 2) Mobility<br><input type="checkbox"/> (C) Limited gait or range of motion<br><input type="checkbox"/> (D) Paraplegic<br><input type="checkbox"/> (E) Quadriplegic | <input type="checkbox"/> 7) Neurological/Nervous System<br><input type="checkbox"/> (O) Motor neuron<br><input type="checkbox"/> (P) Acquired brain injury<br><input type="checkbox"/> (Q) Developmental disability                                                                                        |
| <input type="checkbox"/> 3) Speech/Language<br><input type="checkbox"/> (F) Speech or language disorder                                                                                      | <input type="checkbox"/> 8) Psychological/Emotional<br><input type="checkbox"/> (R) Mental disorders<br><input type="checkbox"/> (S) Autism spectrum disorders                                                                                                                                             |
| <input type="checkbox"/> 4) Learning Disability<br><input type="checkbox"/> (G) Attention deficit disorder<br><input type="checkbox"/> (H) Dyslexia or processing deficits                   | <input type="checkbox"/> Other (specify) _____                                                                                                                                                                                                                                                             |
| <input type="checkbox"/> 5) Blind/Visual<br><input type="checkbox"/> (I) Blind<br><input type="checkbox"/> (J) Visual disorders other than blind                                             |                                                                                                                                                                                                                                                                                                            |

Internal use only

DSS Code:

revised: 8.12.21