



Service Request Form

Person Requesting Services:

Note: Person requesting services must be an eligible student of SSCC, meaning they have registered for classes at any of the four campuses of Southern State Community College and have been approved by the Office of Disability Services as needing such accommodations.

Student Name _____

Student ID _____

Student Phone # _____

Student Email _____

Services Needed for:

Date _____

Start Time _____ End Time _____

Description of Assignment _____

Location _____

Please Check Services you are Requesting:

Interpreter

Test Proctor

C-Print Captionist

Closed Captioning (for faculty use)

Transcription

Points to remember:

- ✓ Request **must be made 48 hours (2 days)** before you need services.
- ✓ Student must be present at the time of transcription.
- ✓ Services must be provided at one of SSCC's campuses.
- ✓ Document must be completed by student prior to appointment. Student cannot spend transcription time to "Finish" the paper. **It must be done before you come to the appointment.**

Student Signature _____ Request Date _____

Coordinator of Disability Services Signature _____

Approve / Disapprove (circle one) Approval Date _____

08/09/2012