

SCHEDULE FORM & REQUEST FOR PROFESSOR LETTERS

California State University Fresno, Services for Students with Disabilities

Ph: (559)-278-2811 VP: (559)-478-2861

Student Name _____

Student ID# _____

Date _____

Telephone # _____

Email _____

Semester _____

Please note that any changes to your mailing address and/or phone number MUST be made on your my.fresnostate.edu account.

INSTRUCTIONS: Enter ALL INFORMATION below carefully and completely. Mark only approved accommodations you are requesting this semester. Submit this form to SSD. Letters will be ready for you to deliver to your professors within two to three business days. Thank you.

Course	Professor	Professor Email	Online Course	Distance Learning	Notetaking	Tape Record	Testing	Textbooks Alternate Format	<ul style="list-style-type: none"> • ASL Terp • FM System • Captionist 	SCOUT	Furniture Request

Comments/ Additional Requests: _____

Professor Letters picked up by student on: _____ (Date)

Student Signature: _____

OFFICE USE ONLY

1. ___ DSTMP	2. ___ Read Copy
3. ___ Terp Copy	4. ___ Letter
5. ___ Package	6. ___ SAM