

Services for Students with Disabilities

Consent Form for Accommodations Request

Student Information		
Student Name:		
School:		
Student Date of Birth:		
Student and Parent/Guardian Signature		
I wish to apply for testing accommodation(s) on College PSAT/NMSQT, and/or Advanced Placement Exams) due to the College Board copies of my records that document testing accommodations; to release any other information requests for the purpose of determining my eligibility for tests; and to discuss my disability and accommodation in College Board permission to receive and review my reconscious personnel and other professionals.	te to disability. I authorize my school: to release the existence of my disability and need for on in the school's custody that the College Board testing accommodations on College Board needs with the College Board. I also grant the	oard e
Student Signature:	<u>Da</u> te:	
Parent/Guardian Signature:	Date:	
(Parent/guardian signature is required if Student is under) 18.	
Instructions to the School		

This form shouldbe used when a request for accommodation(s) is submitted electronically (via SSD

sent to the College Board. You will be asked to verify that a signed Consent Form is on file at the school prior to submitting a request for accommodations.