

ACCOMMODATIONS REVIEW FORM

Please complete if you already have completed an Accommodations Request Form and you are in need of more assistance with your accommodations.

This form helps Hillsdale College to understand why a student's accommodations might be ineffective or incomplete, and to consider additional or different accommodations, if necessary. If you are having problems with your current accommodations, please complete and submit this form, and provide copies of any new medical documentation or recommendations.

1.	1. Please describe your current accommodations.				
2.	Please describe the issu	ies with your current a	accommodations.		
3.	3. What steps have you taken thus far to address the issue?				
4.	4. How would you like to see the matter resolved?				
Last Na	ime		First Name		
Address			City		
State		Zip	Cell Phone		
Submit Date: /					

Return this form and related documents to:

Aaron Petersen, Dean of Men

Hillsdale College, 33 E. College St.

Hillsdale, MI 49242