



Office of Disability Services

INFORMATION RELEASE FORM

21000 West Ten Mile Road C405
 Southfield, MI 48075
 Phone: 248.204.4100
 Fax: 248.204.4115
 Email: disability@ltu.edu

As required by Section 504 of the Rehabilitation Act and the Americans with Disabilities Act, Lawrence Tech works to provide effective accommodations, auxiliary aids and services for qualified students with documented disabilities. Students who require accommodations are encouraged to identify themselves as early as possible so that appropriate accommodations can be arranged. In accordance with Section 84.42 (C), Section 504 of the Rehabilitation Act of 1973, failure to inform the University of a Disability in advance of registration may result in a delay in the provision of services. In order to be recognized as a student with a disability and receive consideration/accommodations for disability-related needs, students must contact The Office of Disability Services for assistance. The confidentiality of information concerning student disabilities will be maintained, except to the extent that it is necessary to notify persons or offices responsible for addressing any special needs. This disability information release will be used for that purpose. In signing this form, you receive priority registration, meaning you are allowed to register the first day registration is open. This form says active until you graduate.

STUDENT INFORMATION

Name (Please Print): _____
 Banner ID: _____

STATEMENT OF AUTHORIZATION

In signing this form, you are providing written authorization to the Office of Disability Services to release information to departments which will help support you in your academic progress. These offices will include areas such as Academic Advising, One Stop Center, and the Registrar, in addition to any other relevant offices. The nature of your disability will not be disclosed, but rather, only identify you as a student with a disability (SWD).

Student Signature: _____ Date: _____

Office Signature: _____ Date: _____