Date of Application: _	
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Northern Essex Community College CENTER FOR ACCESSIBILITY RESOURCES & SERVICES (CARS) DEAF AND HARD OF HEARING SERVICES (DHHS)

Application for Services

Student's: First Name	MI	Last Name			
	Student's: Preferred telep	hone #	Secondary telephone #		
Address: Street/Apt#/P.O. Bo	ox City		State	Zip	
NECC Student ID #	Email address		Date of Birt	h	
	ion or GED/HiSet	How did you	u hear about C	ARS/DHHS?	
I give permission for CARS Yes-preferred phone No-preferred phone		Yes-seco	<i>leo phone (VP)</i> ndary phone # ndary phone #	-	
Campus preference for mee	ting with CARS: Haverhi	II 🗌 Lawrence	е		
 I have completed an NECOD. Currently, I am/will be a sod. I have registered for classod. Student Disability Inform 	estudent for: (check one)	pring S	ummer 🗌	Fall Year:	
4. Please check all that app	ly:				
☐ Learning Disability [☐ ADD/ADHD ☐ Autism S	Spectrum Disord	der/Asperger's	Syndrome	
☐ Brain Injury [☐ Intellectual Disability	Intellectual Disability			
Other Psychiatric:	☐ Bipolar ☐ Depress				
☐ Physical Disability:	n (i.e. Seizure Disorder):				
	ing allergies):				
☐ Deaf ☐ Hard of Hea		Deaf Blind [Cochlear Im	plant	
	bove is checked, which one impa			·	
6. I understand that I am red	quired to submit appropriate doc ecommend reasonable accommo	cumentation in o			

Academic Assessment Information and A	Accommodation Request(s)
7. I have taken the Academic Assessment.	☐ Full Waiver ☐ Yes (Date:) ☐ No
8. I am requesting accommodations for the Aca	ademic Assessment.
Academic Classroom/Course Accommod	lation Request(s)
9. I am requesting the following academic class	room or course accommodations/services:
Agency/Contact Information	
10. I am a client of:	
State Vocational Rehabilitation Agency:	Counselor's Name/Office & Telephone Number
☐ MassAbility:	
NH Rehabilitation Commission:	
Other State Agency:	
☐ Department of Developmental Services:	
Other:	
Other resources:	
Other General Information	
11. I have applied for Financial Aid.	☐ Yes When? ☐ No
12. Other colleges that I have attended:	
13. I plan to participate in Intercollegiate Athlet	cics.
14. I understand that I need to make my own an necessary transportation arrangements.	rrangements for transportation to the college and I have made the $\hfill \square$ Yes $\hfill \square$ No
15. Optional:	☐ I am a Veteran ☐ I am on Active Duty
Emergency Evacuation Information	
CARS informs NECC Public Safety of your course	nce (i.e. NECC Public Safety, Fire/Police.)? Yes No Schedule. To learn more about Emergency Evacuation procedures NECC Public Safety Director, publicsafety@necc.mass.edu
Exchange of Information	
·	nsult with NECC offices such as the Testing Center, Academic dent Services regarding accommodations and services. Yes No
Student's Signature (electronic signature ok)	Date
Signature of CARS/DHHS Staff (electronic signat	 ure ok) Date