



Disability Support Services    California State University San Marcos    333 S. Twin Oaks Valley Road    San Marcos, CA 92096-0001  
Tel: 760.750.4906    Fax: 760.750.3445    jsegoria@csusm.edu    www.csusm.edu/dss/

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Dear Calculus Placement Exam Applicant:

You have requested special testing accommodations through our Disability Support Services office for the Calculus Placement Exam. Special testing accommodations are available to students who a qualifying disability which requires a modification the standard testing conditions.

In an effort to provide you with special testing accommodations for the Calculus Placement Exam, it is necessary to have written documentation verifying the existence of a disability. In addition to a current diagnosis, specific information is required on how the disability impacts test taking under standard conditions (i.e., slowed cognitive processing, impaired writing). Please have your treatment provider complete the Special Testing Verification Form.

Please keep in mind the attached Special Testing Verification Form is only being used to substantiate the need for reasonable testing accommodations at CSU San Marcos for the Calculus Placement Exam. It is possible that additional documentation will need to be submitted for other accommodation requests as a CSU San Marcos student. Should you have any questions, I can be reached at (760) 750-4905.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Segoria".

John Segoria  
Director of Disability Support Services



DISABILITY SUPPORT SERVICES  
CALCULUS PLACEMENT EXAM  
APPLICATION FOR ACCOMMODATIONS

TO BE COMPLETED BY THE STUDENT

NAME: \_\_\_\_\_ ID #: \_\_\_\_\_

PHONE NUMBER: ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
STREET  
CITY STATE ZIP

WHAT TEST DATE HAVE YOU SIGNED UP FOR? \_\_\_\_\_

IS DOCUMENTATION ON FILE AT DISABILITY SUPPORT SERVICES?  YES |  NO  
(If yes, further disability verification and documentation is not required)

WHAT TYPE(S) OF TESTING ACCOMMODATIONS WILL BE NEEDED FOR THE EXAM? (Check all that apply)

EXTENDED TIME:  REGULAR TIME |  TIME AND A HALF (X 1.5) |  DOUBLE TIME (X 2) |  TRIPLE TIME (X 3)

ALTERNATE TEST ROOM |  BRAILLE |  READER |  SCRIBE |  ENLARGED PRINT |  COMPUTER ASSISTED

SIGN LANGUAGE INTERPRETER (if selected, please select one of the following below):

SIGNED EXACT ENGLISH |  AMERICAN SIGN LANGUAGE (ASL)

OTHER (if selected, please list other accommodations below):  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE NOTE: APPROVED ACCOMMODATIONS WILL BE FOR THE CALCULUS PLACEMENT EXAM ONLY. ADDITIONAL TESTING AND DOCUMENTATION MAY BE REQUIRED IN ORDER TO RECEIVE ONGOING ACCOMMODATIONS AS A STUDENT AT A CALIFORNIA STATE UNIVERSITY (CSU) CAMPUS.

I authorize the release of medical information, and all other information, requested on this form to California State University San Marcos and the CSU Chancellor's Office.

\_\_\_\_\_  
SIGNATURE OF STUDENT

\_\_\_\_\_  
DATE