Appendix B

Guidelines for Disability Documentation

BSC Veterans Services and Student Accessibility Office
Jack Science 312

(Adopted from the North Dakota Colleges and Universities Disability Services Council)

GUIDELINES FOR DISABILITY DOCUMENTATION

North Dakota Colleges and Universities
Disability Services Council

One of the objectives of the North Dakota Colleges and Universities Disability Services Council (NDDSC) is to create a comprehensive accessible environment where students are viewed on the basis of ability, not disability. NDDSC members use documentation of disability to: 1) establish whether an individual is a person with a disability; and 2) provide a rationale for identifying and implementing reasonable accommodations.

Reasonable accommodations and services are available for students with disabilities in accordance with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. The ADA Amendments Act, effective January 1, 2009, included the original major life activities and expanded the definition to include “major bodily functions.”

The Amendments Act retained the original ADA basic definition of a disability as:
1) Having a physical or mental impairment that substantially limits one or more major life activities; 2) Having a record of such an impairment; or 3) Being regarded as having such an impairment.

The NDDSC reflects the Association of Higher Education and Disability’s (AHEAD) “Sources and Forms of Documentation” (2012) in its criteria for documentation guidelines.

Along with the more objective determination of a disability and its impact provided by external documentation, institutions recognize input from the individual with a disability as also an important source of information on the impact of the disability and on the effectiveness of accommodations. This is gathered through the student’s self-report and observation and interaction with the student.

Disability documentation gathered from various sources to support the student report and interactions can include:

1) A clear diagnostic statement that describes the condition.

2) A description of the diagnostic criteria and/or evaluation methods and/or tests used, and/or clinical narrative and/or observations, and specific results, which are congruent with the particular disability.
3) A description of the current functional limitations and how those limitations affect the student in a major life activity. A “functional limitation” is defined as an adverse effect on a major life activity caused by the disability. Functional limitations should be described in terms of how significantly the activity is affected by the disability, the frequency with which the activity is affected, and how pervasive the disability is in the performance of the major life activity.

4) A description of medications and their effectiveness in relation to the functional impact of the disability. Information about any significant side effects from the current treatment or medication and its effect on physical, perceptual, behavioral, and cognitive performance is helpful.

5) A description of the expected progression or stability of the disability including the expected changes over time, information on the cyclical or episodic nature of the disability and any known suspected environmental triggers.

6) The credentials of the evaluator/provider relevant to the diagnosed disability. The professional should be licensed or otherwise properly credentialed.

7) Professionals may provide recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or support services that are logically related to the functional limitation(s). College disability service providers are under no obligation to provide the recommendations but may opt to consider them in determining reasonable accommodations.

Flexible and accessible documentation should make use of current and relevant information that illustrates a connection between the impact of the disability, the described barrier, and the requested accommodation (AHEAD).

Adopted: April 2001
Revised and approved by the NDDSC: October 2006; June 2013
