

REGISTRATION FORM

First Name: _____.

Middle Name: _____.

Last Name: _____.

Rutgers ID (RUID): _____.

Net ID: _____.

Primary Email: _____.

Please indicate your disability, check all that apply:

- ADD/ADHD
- Learning Disability
- Visual Impairment
- Deaf and Hard of Hearing
- Speech and Language Impairment
- Psychological/ Psychiatric Disability
- Neurological Condition
- Medical Condition
- Post-Traumatic Stress Disorder
- Asperger's/ Autism
- Brain Injury
- Allergy
- Mobility Impairment
- Other- Please explain below: _____

_____.

Please check the reasonable accommodations that you will request from Rutgers:

- I would like to use my exam accommodations for my placement exams. (This typically applies to incoming students only.)

Exam Accommodations:

- Extended Time (50%) for in class and/or online exams/quizzes
- Extended Time (100%) for in class and/or online exams/quizzes
- Reduced Distraction Testing Location
- Reduced Distraction Testing Location (Alone)
- Enlarged Print for Exams/Quizzes
- Use of Text Reader such as Kurzweil 3000, Read and Write Gold or Voiceover for exams/quizzes
- Use of a Screen Reader such as JAWS for exams/quizzes
- Use of a Reader for exams/quizzes
- Use of a Scribe for exams/quizzes
- Use of computer/laptop for exams/quizzes if related to your disability
- Use of a calculator for exams/quizzes unless it compromises the essential function of the course
- No ScanTrons for exams/quizzes

In Class Accommodations:

- Note Taking Services
- Computer Aided Realtime (CART) captioning
- American Sign Language Interpreter for class

Assistive Technology:

- Use of a Text Reader such as Kurzweil 3000, or Voiceover to Read Course Materials
- Use of a Smart Pen (Live scribe or Echo) to record lectures and take notes
- Use of a Screen Reader such as JAWS, Voiceover, or NVDA
- Use of a Digital Recorder to Record Lectures
- Other Accommodations that you would like to receive at Rutgers, not listed above:

Personal Student Information

Date of Birth: (/ /)

Gender: _____.

Home Street Address: _____.

Apartment or Room Number: _____.

City: _____ State: _____ Zip Code: _____.

College Street Address: _____.

College Apartment or Room Number: _____.

City: _____ State: _____ Zip Code: _____.

Educational History

What was, or will be, your first semester at Rutgers University:

- Fall
- Spring

What year? _____.

High School Information:

High School Attended: _____.

City, State: _____.

Graduation Year: _____.

Previous University (if applicable):

Location: _____.

Name of College/ University: _____.

Dates Attended: _____.

Current Students:

For Students who are currently attending Rutgers University,

Your Current Rutgers School or College: _____.

Current Major: _____.

Current Class Standing:

- Graduate Student

Expected Graduation Year: _____.

Days/Times Available for Intake Appointment: _____.

_____.

Comments: _____.

_____.