

**THE OFFICE OF STUDENT ENRICHMENT SERVICES AND SUPPORT  
NORTH PARK UNIVERSITY**

PRELIMINARY SURVEY FOR STUDENTS WITH DISABILITIES

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North Park University is committed to full compliance with all laws regarding equal opportunities for students with disabilities. The Office of Student Enrichment Services and Support provides services and accommodations, as well as academic support, to students with disabilities. It is our goal to provide every opportunity for students with disabilities to succeed in our community.

Please review the steps listed below which detail the process for setting up academic accommodations and then fill out the attached survey as completely as possible. In order to ensure the implementation of academic accommodations, we must receive your survey no later than two weeks prior to the start of the upcoming academic term. The information in this survey will help us to efficiently and effectively determine the services we may be able to provide for you as a student at North Park. Once we receive your completed survey, you will be contacted by a member of the Student Enrichment Services and Support staff via phone or email.

STEPS FOR IMPLEMENTING ACCOMMODATIONS AND ACADEMIC SUPPORT AT  
NORTH PARK UNIVERSITY:

- Review the steps for implementing accommodations and/or academic support services. Keep this information page for your future reference.
- Review the attached page titled “Differences in Secondary & Post-Secondary Education for Students with Disabilities.” Keep this information page for your future reference.
- Fill out the “Preliminary Survey for Students with Disabilities” beginning on the following page.
- Obtain a copy of current (within the past 3 years) documentation of your disability. Submit the copy of your official documentation with your completed survey to the Office of Student Enrichment Services and Support via mail or fax (contact information below).

***Important Note:*** Acceptable official documentation of a disability includes a comprehensive diagnostic report summary signed by a licensed professional (e.g., physician, psychologist, or psychiatrist) detailing the tests/measures administered, DSM-IV diagnostic code, analysis of test results, and suggested accommodations. **A copy of an IEP or 504 Plan alone will NOT suffice to implement accommodations.**

- The Office of Student enrichment Services and Support will confirm receipt of your survey and if necessary will contact you to discuss any specific questions or concerns related to your accommodations requests.
- At the beginning of the upcoming academic term (and each successive term thereafter), you will be contacted via email to make an appointment in the Office of Student Enrichment Services to review your accommodations and receive letters detailing the accommodations you request in your classes, which you can distribute to your professors. The Office of Student Enrichment Services and Support will serve as a liaison to assist you with any academic concerns that may arise in your courses.

THE OFFICE OF STUDENT ENRICHMENT SERVICES AND SUPPORT  
NORTH PARK UNIVERSITY  
3225 W. FOSTER AVE., BOX 24  
CHICAGO, IL 60625  
PHONE: (773) 244-5737      FAX: (773) 634-6726  
[www.northpark.edu/advising](http://www.northpark.edu/advising)

# THE OFFICE OF STUDENT ENRICHMENT SERVICES AND SUPPORT

## SERVICES FOR STUDENTS WITH DISABILITIES PRELIMINARY SURVEY FOR STUDENTS WITH DISABILITIES

### STUDENT BACKGROUND INFORMATION

\_\_\_\_\_  
Last name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Day Phone Number

\_\_\_\_\_  
Email Address

### ANTICIPATED ENROLLMENT

I will be entering North Park University as a: *(check one)*

- |                                    |                                              |
|------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Freshman  | <input type="checkbox"/> SAL Program student |
| <input type="checkbox"/> Sophomore | <input type="checkbox"/> Graduate student    |
| <input type="checkbox"/> Junior    | <input type="checkbox"/> Seminary student    |
| <input type="checkbox"/> Senior    |                                              |

Desired entrance date: *(check one)*

- Fall Semester, 20\_\_\_\_
- Spring Semester, 20\_\_\_\_
- Summer Session, 20\_\_\_\_

I plan to: *(check one)*

- Live in the residence halls.
- Commute to North Park.

### NATURE OF DISABILITY

Which of the following best describes the nature of your disability? *(You may check more than one box)*

- |                                                                                     |                                                 |
|-------------------------------------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Language disorder (receptive or expressive)                | <input type="checkbox"/> Hearing Impairment     |
| <input type="checkbox"/> Reading disorder (e.g., dyslexia)                          | <input type="checkbox"/> Vision Impairment      |
| <input type="checkbox"/> Writing disorder                                           | <input type="checkbox"/> Mobility Impairment    |
| <input type="checkbox"/> Mathematics disorder                                       | <input type="checkbox"/> Traumatic Brain Injury |
| <input type="checkbox"/> Nonverbal learning disability                              | <input type="checkbox"/> Chronic Disease        |
| <input type="checkbox"/> Attention-Deficit/Hyperactivity Disorder                   |                                                 |
| <input type="checkbox"/> Autism Spectrum Disorder/Pervasive Developmental Disorder  |                                                 |
| <input type="checkbox"/> Psychological/Psychiatric Disorder (please specify): _____ |                                                 |
| <input type="checkbox"/> Other (please specify): _____                              |                                                 |

Do you have current official documentation of your disability?  No  Yes

**IMPORTANT NOTE:** In order to implement accommodations at North Park, you must have current (within the past 3 years) official documentation of your disability. Acceptable official documentation of a disability includes a comprehensive diagnostic report summary signed by a licensed professional (e.g., physician, psychologist, or psychiatrist) detailing the tests/measures administered, analysis of test results, and recommendations for accommodations. A copy of an IEP or 504 plan alone will NOT suffice to implement accommodations. Please send a copy of your documentation with your completed survey.

Please describe the functional impact your disability has upon your everyday life and academics. (You may attach a separate page if necessary.)

## MEDICAL HISTORY

Have you experienced any significant injuries and/or medical complications and/or illnesses which have brought about or contributed to your present difficulties?  No  Yes

If yes, please explain, including the approximate date and a brief explanation of the occurrence:

## EDUCATIONAL HISTORY

Did you receive any type of special education services in high school?  No  Yes

If yes, please describe the support services you received:

Have you attended any other schools since your graduation from high school?  No  Yes

If yes, please list the names, locations, and dates of attendance for those schools:

*Example: University of Illinois, Chicago, IL, 8/05-5/06*

Did you receive any type of special education services while attending these schools?  No  Yes

If yes, please describe the support services you received:

#### ADDITIONAL INFORMATION

Please list any further information that may be useful to the Office of Student Enrichment Services and Support as we seek to determine the most effective implementation of accommodations and services for you:

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Thank you for taking the time to complete this survey. We will make every effort to implement effective accommodations for you during your time at North Park University. You will soon be contacted by a member of Student Enrichment Services and Support to further discuss the enclosed information.

Please send your completed survey and a copy of your official disability documentation to:

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