SUPPORTING DOCUMENTATION

The kind of documentation needed may vary depending on the nature of the disability.

1. Learning Disabilities (LD)

Note: These guidelines for documentation of a learning disability are based upon those set forth by the Association on Higher Education and Disabilities (AHEAD). For more information please visit AHEAD’s web site at http://www.ahead.org.

Currency
Since accommodations are based on the current impact of the learning disability to the student, documentation must be up to date (within the past three years).

Qualifications Of Diagnostician
Professionals diagnosing LD must have comprehensive training in differential diagnosis & direct experience with adolescents and adults with LD. The following professionals are considered qualified:
- Certified/licensed psychologists
- Neuropsychologists
- LD specialists
- Educational therapists
Diagnostic reports should include the names, titles, professional credentials, addresses, and phone numbers of the evaluators as well as the date(s) of testing.

Criteria For Comprehensive Assessment
Testing must include at least one assessment from each of the following areas:

Aptitude
- Wechsler Adult Intelligence Scale-Revised (WAIS-R or WAIS-III), must include Full Scale IQ, Verbal IQ, Performance IQ, and all subtest scores
- Woodcock Johnson Psycho-educational Battery-Revised: Tests of Cognitive Ability (must include either tests 1-7 or 1-14)
- Stanford-Binet Intelligence Scale
- Kaufman Adolescent & Adult Intelligence Test

Achievement: Reading
- Woodcock Johnson Psycho-educational Battery-Revised: Tests of Achievement
- Scholastic Abilities Test for Adults (SATA)
- Stanford Test for Academic Skills
- Wechsler Individual Achievement Test (WIAT)
- Nelson Denny Reading Skills Test
- Woodcock Reading Mastery Tests Revised

Achievement: Written Language
- Woodcock Johnson Psycho-educational Battery-Revised: Tests of Achievement
- Scholastic Abilities Test for Adults (SATA)
- Stanford Test of Academic Skills
• Wechsler Individual Achievement Test (WIAT)
• Test of Written Language

Note: The above list is not intended to be exhaustive or to limit assessment in other areas that may be pertinent to the individual’s needs.

The Diagnostic Report

Diagnosis
The report must include a clear statement of the learning disability and the reasoning for this particular diagnosis as supported by the current diagnostic battery. A student’s individual “learning style,” “learning deficit,” “learning differences,” and “learning disorders” do not, in and of themselves, constitute a disability.

Diagnostic Interview
A summary of the diagnostic interview must be included. Relevant information regarding the student’s academic history and learning processes in elementary, secondary, and postsecondary education should be addressed. The summary should also include developmental, medical, psychosocial, and family history as it relates to the student’s current level of functioning.

Test Scores
All test scores must be included in the report, especially the standard scores and percentiles. This data should represent a substantial limitation to learning.

Descriptive Text
The report should indicate:
- That the evaluator rules out alternative explanations for the academic problems.
- Patterns in the individual’s cognitive abilities, achievement, and information processing reflect the presence of a learning disability.
- The substantial limitation to a major life activity and the degree of its impact.

Accommodations
Report must indicate recommended accommodations that are appropriate at the graduate school level. Specific test results must support these recommendations.

2. Attention Deficit Disorder

Note: Although the more generic term “Attention Deficit Disorder” (ADD) is often used, we will use the official nomenclature from the Diagnostic and Statistical Manual of Mental Disorders (DSM 5), Attention Deficit Hyperactivity Disorder (ADHD).

Currency
Since accommodations are based on the current impact of the disability to the student, documentation must be up to date (within the past three years).

Qualifications of Diagnostician
Professionals diagnosing ADHD must have comprehensive training in differential diagnosis & direct experience with adolescents and adults with ADHD.
The following professionals are considered qualified:

- Clinical psychologists
- Neuropsychologists
- Psychiatrists
- Other qualified medical doctors

Evidence of Early Impairment

Because ADHD is, by definition, first exhibited in childhood and manifests itself in more than one setting, historical and academic information must be gathered by the evaluator.

Evidence of Current Impairment

Assessment should consist of more than just a self-report. It should include a history of attentional symptoms, including evidence of ongoing impulsive, hyperactive or inattentive behavior that has significantly impaired functioning over time.

Alternative Diagnosis and/or Explanation

The assessment should also examine the possibility for a co-existing diagnosis. It should explore possible alternative diagnoses including psychiatric and medical disorders as well as any educational or cultural factors that may impact the individual and result in behaviors similar to ADHD.

Diagnostic Battery

Neuropsychological or psycho-educational assessment is critical in determining the current impact of ADHD on the individual’s ability to function in different settings. Assessment must include standardized measures for inattention, hyperactivity and impulsivity as delineated in the DSM 5.

Diagnostic Report and Summary

The diagnostic report must be a comprehensive interpretive summary synthesizing the evaluator’s judgment for the diagnosis of ADHD.

The report must include:

- All quantitative information in standard scores and/or percentiles.
- All relevant developmental, medical, familial, medication, psychosocial, behavioral and academic information.
- A specific diagnosis of ADHD based on the DSM 5 diagnostic criteria.

The report must also identify in clear, direct language, the substantial limitation of a major life function presented by the ADHD. Specific recommendations for accommodations based on significant functional limitations must be supported by the assessment. Official letterhead with names, titles, professional credentials, addresses, and phone/fax number of the evaluator as well as the date(s) of testing.

3. Psychiatric/Psychological Disabilities

Psychiatric and psychological disabilities include but are not limited to: Depressive Disorders, Post Traumatic Stress Disorder, Bipolar Disorders, and Dissociative Disorders. A diagnosis by a licensed mental health professional (psychologist, psychiatrist, or a neurologist) is required and must include the diagnostician’s license number.
Documentation must include:

- A clear statement of the disability, including the DSM 5 diagnosis and a summary of present symptoms. This diagnosis should be based upon a comprehensive clinical interview including psychological testing (when such testing is clinically appropriate).
- A summary of assessment procedures and evaluation instruments used to make the diagnosis and a summary of evaluation results, including standardized or percentile scores.
- Medical information relating to the student’s needs to include the impact of medication, if applicable, on the student’s ability to meet the demands of graduate school education.
- Information supporting substantial interference with one or more major life functions to determine eligibility for meeting criteria for a disability. The major life function(s) being affected must be stated in the documentation.
- Suggestions of reasonable accommodations that might be appropriate for a graduate school. These recommendations must be supported by the diagnosis.

4. Head/Traumatic Brain Injuries

Head Injury or Traumatic Brain Injury is considered a medical or clinical diagnosis. Individuals qualified to render a diagnosis for these disorders are practitioners who have been trained in the assessment of Head Injury or Traumatic Brain Injury. Recommended practitioners may include physicians, neurologists, licensed clinical psychologists, school psychologists, neuropsychologists and psychiatrists.

Documentation must include:

- A clear statement of the head injury or traumatic brain injury and the probable site of lesion.
- A summary of cognitive and achievement measures used and evaluation results including standardized scores or percentiles used to make the diagnosis.
- A summary of present residual symptoms that meet the criteria for diagnosis.
- Medical information relating to student’s needs to include the impact of medication on the student’s ability to meet the demands of the graduate school environment.
- Suggestions of reasonable accommodations that might be appropriate at the graduate school are encouraged. These recommendations should be supported by the diagnosis.

5. Physical Disabilities and/or Systemic Illnesses

Physical disabilities and systemic illnesses include but are not limited to: Mobility Impairments, Multiple Sclerosis, Cerebral Palsy, Chemical Sensitivities, spinal cord injuries, Cancer, AIDS, Muscular Dystrophy, and Spinal Bifida. Any physical disability and/or systemic illnesses are considered to be in the medical domain and require the expertise of a physician, including a neurologist, psychiatrist or other medical specialist with experience and expertise in the area for which accommodations are being requested.

Documentation must include:

- A clear statement of the medical diagnosis of the physical disability or systemic illness.
- Documentation for eligibility should be current, preferably within the last three years (the age of acceptable documentation is dependent upon the disabling condition, the current status of the student and the student’s request for accommodations).
- A summary of assessment procedures and evaluation instruments used to make the diagnosis, including evaluation results and standardized scores if applicable.
- A description of present symptoms that meet the criteria for diagnosis.
• Medical information relating to the student’s needs to include the impact of medication on the student’s ability to meet the demands of the graduate school environment.
• Suggestions of reasonable accommodation that might be appropriate at the graduate school level are encouraged. These recommendations should be supported by the diagnosis.

6. Blindness/Visual Impairment

Ophthalmologists are the primary professionals involved in diagnosis and medical treatment of individuals who are blind or experience low vision. Optometrists provide information regarding the measurement of visual acuity as well as tracking and fusion difficulties (including but not limited to: eye movement disorders, inefficiency in using both eyes together, misalignment of the eyes, lazy eye, focusing problems, visual sensory disorders, and motor integration).

Documentation must include:
• A clear statement of vision related disability with supporting numerical description (the age of acceptable documentation is dependent upon the disabling condition, the current status of the student, and the student’s request for accommodations).
• A summary of assessment procedures and evaluation instruments used to make the diagnosis.
• A summary of evaluation results including standardized scores, present symptoms that meet the criteria for diagnosis, medical information relating to the student’s needs and the status of the individual’s vision (static or changing), its impact on the demands of the academic program, narrative or descriptive text, providing both quantitative and qualitative information about the student’s abilities that might be helpful in understanding the student’s profile, including the use of corrective lenses and ongoing visual therapy (if appropriate), and suggestions of reasonable accommodations that might be appropriate at the graduate school level are encouraged. These recommendations should be supported by the diagnosis.

7. Deafness/Hearing Impairment

Services are provided to all deaf and hearing-impaired students at St Vladimir’s Seminary who have a documented unaided bilateral hearing loss of at least 30 db. The audiologist who conducts this should be an impartial individual who is not related to the student.

Documentation must include:
• A clear statement of deafness or hearing impairment with an audiogram that has been completed within the last three years.
• A summary of assessment procedures used to make the evaluation and a narrative summary of results, name, address, phone, title and/or credentials of audiologist.