

## DISABILITY DOCUMENTATION GUIDELINES

Embry Riddle Aeronautical University is committed to providing equitable access to campus programs and activities to persons with disabilities. These guidelines are designed to assist providers in documenting a student's relevant disability information which will be used to determine accommodations. Documentation should be authored by a licensed clinical professional or health care provider, who is both trained and qualified to evaluate the disability and familiar with the student's history. The documentation should be recent enough to reflect the student's current status. Copies of IEPs and Section 504 plans are informative, but if a diagnosis is not stated and test results are not reported these documents may not be sufficient documentation to support accommodation. Documentation may not be provided by a student's relative, friend, or family friend. **PLEASE do not send copies of the student's medical records.**

**Please provide the following information on practice letterhead.**

- Name, credentials, and contact information of the evaluator.
- The nature of the disability and relevant history.
- DSM-V or ICD-10 diagnosis with information outlining the duration, severity, treatment and expected prognosis of the condition. If the condition is temporary, the expected length of time to recovery.
- Test results, including scores and written evaluation of scores (if applicable).
- Describe any treatments, medications, assistive devices/services the student is currently using. Note their effectiveness and any side effects that may impact the student's physical, perceptual, or cognitive performance.
- A description of how the disability impacts engagement in day-to-day activities related to attending college.
- Suggested accommodations.

This information is kept confidential except as required by law.

**Please submit this information marked confidential to:**

Disability Support Services  
Building 500 1 Aerospace Blvd.  
Daytona Beach, FL 32114  
Email: DBDSS@erau.edu  
Phone: (386) 266-7916  
Fax: (386) 226-6071



### Examples of Documentation by Disability

Disability	Appropriate Documentation
ADHD/ADD	<ul style="list-style-type: none"> <li>Neuropsychological/Psychoeducational Testing and Report AND/OR</li> <li>Statement from psychiatrist, nurse practitioner, primary care doctor, or other qualified clinical professional</li> </ul>
Autism Spectrum Disorder	<ul style="list-style-type: none"> <li>Neuropsychological/Psychoeducational Testing and Report AND/OR</li> <li>Statement from psychiatrist, nurse practitioner, primary care doctor or other qualified clinical professional</li> </ul>
Blind or Low Vision	<ul style="list-style-type: none"> <li>Report from ophthalmologist or optometrist AND/OR</li> <li>Documentation from an agency that specializes in working with individuals who are blind or have low vision i.e. Iris Network, Bureau of Rehabilitation Division for the Blind</li> </ul>
Deaf or Hard of Hearing	<ul style="list-style-type: none"> <li>Report from audiologist or otolaryngologist including audiogram AND/OR</li> <li>Documentation from an agency that specializes in working with individuals who are Deaf or Hard of Hearing i.e. Maine Center on Deafness, Division for the Deaf, Hard of Hearing and Late-Deafened</li> </ul>
Learning Disability	<ul style="list-style-type: none"> <li>Neuropsychological/Psychoeducational Testing and Report</li> </ul>
Medical and Chronic Health	<ul style="list-style-type: none"> <li>Statement from physician, medical specialist, physical therapist, occupational therapist or other qualified clinical professional</li> </ul>
Mental Health	<ul style="list-style-type: none"> <li>Statement from psychiatrist, social worker, nurse practitioner, primary care doctor or other qualified clinical professional</li> </ul>
Physical and Neurological	<ul style="list-style-type: none"> <li>Statement from physician, medical specialist, physical therapist, occupational therapist or other qualified clinical professional AND/OR</li> <li>Documentation from an agency that specializes in working with individuals with barriers to physical movement i.e. Office of Adults with Cognitive and Physical Disabilities</li> </ul>
Speech and Language	<ul style="list-style-type: none"> <li>Neuropsychological/Psychoeducational Testing and Report AND/OR</li> <li>Documentation from Medical Speech-Language Pathologist, Speech Therapist or other qualified clinical professional</li> </ul>
Traumatic Brain Injury and other Cognitive Disabilities	<ul style="list-style-type: none"> <li>Neuropsychological/Psychoeducational Testing and Report AND/OR</li> <li>Statement from physician, physical therapist, occupational therapist or other qualified clinical professional</li> </ul>

**Items not suitable for documentation include but are not limited to:** Prescription bottles, prescriptions, handwritten notes on prescription pads, documentation provided by certified but not licensed professionals i.e. MHRTC, DSP. Copies of IEPs and Section 504 plans are informative, but if a diagnosis is not stated and test results are not reported these documents may not be sufficient documentation to support accommodation. Written statements submitted for documentation must include all information requested on the front of this handout.

