

Milwaukee Area Technical College
Student Accommodation Services
700 W. State Street
Milwaukee, WI 53233
(414) 297-6750



GED
ADMISSIONS
APPRENTICE

TEST ACCOMMODATION REQUEST FORM

You have made a request for test accommodations. To help us process your request for accommodations, please complete the following information and submit it with your documentation of disability:

Name _____ Social Security # (optional) _____

Address _____

City _____ State ____ Zip Code _____ Home Phone _____

Email: _____ Cell #: _____ High School
Attended _____

Birthdate _____ Age _____ Are you currently enrolled at MATC? _____

What is your disability? Note: MATC retains the right to request additional medical certification of your claimed disability.

Accommodations requested:

Why do you need the requested accommodation(s)?

Do you need a sign language interpreter? _____ Yes _____ No

Are you deaf? _____ Yes _____ No Are you hard of hearing? _____ Yes _____ No

What language do you prefer? _____ ASL _____ PSE _____ Signed English

Applicant Signature

Date

Student Accommodation Services: Date Received _____ Documentation Attached? _____

Action Taken and Date:

4-21-14/SAS/cab