

Appendix 2 Sample accommodations letter

Name of student:

Name of Institution:

Date

To whom it may concern:

I am writing this letter as the treating clinician for the above student who has medical conditions that affect academic functioning. Therefore, I am recommending the following accommodations:

Decreased course load

Not penalized for missing classes/being late especially for morning classes

Not penalized for lack of class participation

Option to give presentation to faculty alone instead of peers

Extended time for assignments/essays/projects

Extended time for exams/tests

Writing exams/tests in quiet room

Changing exam/tests/assignment schedules to decrease stress (i.e., not multiple deadlines in the same week)

If you have any concerns/questions, please contact me directly at

Sincerely,