



Students, faculty, staff, and campus guests wishing to request accommodations due to learning disabilities should refer to the following documentation requirements:

1. Requirements of the PRACTITIONER:

- A) The evaluation must be conducted by a qualified individual. The following professionals would generally be considered qualified, provided that they have additional training and experience in the assessment of learning problems in adolescents and adults: clinical or educational psychologists, school psychologists, neuropsychologists, and learning disability specialists.
- B) Practitioners need to adhere to their profession's code of ethics as it relates to qualifications and conflicts of interest.
- C) Documentation must be typed, dated, signed by the evaluator and submitted to DR on professional letterhead in English.

2. Requirements of the REPORT/EVALUATION:

- A) Documentation should validate the need for services based on the individual's current level of functioning in the educational or work setting. A comprehensive assessment battery and the resulting diagnostic report should include a diagnostic interview, assessment of aptitude, academic achievement, summary, and a diagnosis. If deficit functioning includes areas not comprehensively assessed by aptitude and achievement testing (ie: short, long term memory and sequential memory, visual and auditory perception, processing speed, executive capabilities) these capacities must be evaluated. A school plan such as an individualized education program (IEP) or a 504 plan is generally insufficient documentation, but it can be included as part of a more comprehensive assessment battery.
 - i) **Diagnostic Interview:** An evaluation report should include the summary of a comprehensive diagnostic interview. Relevant information regarding the individual's academic/work history, and learning processes in elementary, secondary, and post-secondary schooling should be investigated. Learning disabilities are manifested during childhood, but not always formally diagnosed. If the individual is being diagnosed later in life, please explain why the condition was not detected earlier. If the individual has utilized accommodations or auxiliary aids in the past (e.g., standardized testing, licensing or certification exams, classroom adjustments), the evaluator should include such information in the interview portion of the report.
 - ii) **Assessment:** The neuropsychological or psycho-educational evaluation for the diagnosis of a specific learning disability must provide clear and specific evidence that a learning disability does or does not exist. Assessment, and any resulting diagnosis, should consist of and be based on a comprehensive assessment battery that does not rely on any one test or sub test. The tests should be normed for the population and meet professionally established levels of reliability and validity. The assessment battery must include tests in three specific areas, addressing the following:
 - (1) **Aptitude** – A complete intellectual assessment with all subtest scores, standard scores and percentiles should be reported.
 - (2) **Academic Achievement** – All subtest scores, standard scores and percentiles should be reported for each subtest in the battery. The battery should include current levels of academic functioning in

relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language.

- (3) **Information Processing** – This component may be necessary, as previously stated.
- (4) **Other Assessment Measures (Optional)** – Non-standard measures and informal assessment procedures or observations may be helpful in determining performance across a variety of domains.
- iii) **Test Scores:** The tests should be reliable, valid and normed for use with an adolescent/adult population. Informal inventories, surveys, and direct observation by a qualified professional may be used in tandem with formal tests in order to further develop a clinical hypothesis. Grade equivalents are not useful unless standard scores and/or percentiles are also included. The test findings should document both the nature and severity of the learning disability.
- iv) **Specific Diagnosis:** The diagnostician is encouraged to use direct language in the diagnosis and documentation of a learning disability, avoiding the use of terms such as "suggests" or "is indicative of." If the individual is experiencing emotional, attention or motivational difficulties that may interfere with learning, evaluators should include such information in the report. If the data indicates that a learning disability is not present, the evaluator should state that conclusion in the report.
- v) **Clinical Summary:** A well-written diagnostic summary based on a comprehensive evaluation process is a necessary component of the report. The clinical summary should include:
 - (1) Indication of how patterns in the individual's cognitive ability, achievement, information processing and other pertinent capabilities reflect the presence of a learning disability
 - (2) Indication of the substantial limitation to learning or other major life activity presented by the learning disability.

It is important to recognize that accommodation needs can change over time and are not always identified through the initial diagnostic process. Conversely, a prior history of accommodation does not, in and of itself, warrant the provision of a similar accommodation. The evaluator should describe the impact the diagnosed learning disability has on a specific major life activity.

All documentation is confidential and should be submitted to:

Disability Resources, Drexel University
3141 Chestnut Street, 81-210 Philadelphia, PA 19104
Phone: 215.895.1401 Fax: 215.895.1402 disability@drexel.edu

Registering with Disability Resources

Drexel University ensures that people with disabilities have an equal opportunity to participate in its programs and activities. Members and guests of the Drexel community who have a disability and need accommodations to participate fully in Drexel University's programs need to file a formal request for accommodations with DR. Along with the request for accommodations, the individual needs to submit appropriate medical or psycho-educational documentation (*See Documentation Requirements*). DR will consider all requests on a case-by-case basis and in a timely fashion. If an individual makes an accommodation request that is not supported by the documentation on file, DR has the right to solicit additional documentation. Once DR obtains complete documentation and has worked with the individual and any other necessary entities to determine reasonable and appropriate accommodations, the official Accommodation Verification Letter (AVL) is issued by DR specifying the approved accommodations.

Documenting a Learning Disability

A learning disability can manifest itself in a variety of ways among individuals. The condition can also present a wide array of symptoms and functional limitations to any given individual over a lifetime. Therefore current documentation serves as the foundation for an individual's request for accommodations at Drexel University. The age of acceptable documentation is dependent upon the disabling condition, the current status of the individual, and the individual's request for accommodations.

DR understands that an individual's functioning may be impacted at times by the absence or presence of mitigating measures (such as medication, auxiliary aids, adaptive devices, etc). Evaluators should disclose the impact of mitigating measures and DR staff will accommodate based on the individual's lowest level of functioning.