



MISSION COLLEGE D.S.P.S.

DISABILITY VERIFICATION BY OUTSIDE RESOURCE

THIS SECTION MUST BE COMPLETED BY THE STUDENT

Name, I.D. #, Email Address, Street Address, Date of Birth, Home Phone Number, Cell Phone Number

In order to receive disability-related services at Mission College, a verification of disability must be provided.

I request that the professional designated below complete this form.

Name of Licensed or Certified Professional, License Number, Address, City & Zip code, Phone Number, Cell Phone Number, Fax Number

THIS SECTION MUST BE COMPLETED BY THE LICENSED OR CERTIFIED PROFESSIONAL

The following information is required and must be filled out in full.

DIAGNOSIS, DSM IV CODE, SEVERITY (if applicable), Please describe how this condition substantially limits MAJOR life activities, CONDITION IS: Stable, Prone to exacerbation, Duration of Disability, Permanent/Chronic, Temporary, Estimated Duration

I understand that the information provided by the verifying professional will become part of the student record and may be released to the student upon their written request.

Verifying Professional Signature, Date

If the information above is completed by someone other than the professional who made the diagnosis, please provide the name and address of the person who made the diagnosis in the space provided below.

Name, Address, City & Zip code

* Please Fax, Email, or Mail this form and attached Educational, Medical and/or Psychological documentation to:

Mission College Disability Support Programs and Services
3000 Mission College Blvd. Mailstop #22
Santa Clara, CA 95054

Administrative Code, Title V, identifies the following qualifying disabilities:

I. PHYSICAL DISABILITY: a visual, mobility, orthopedic or other health impairment.

- A. Visual impairment means a total or partial loss of sight.
- B. Mobility and Orthopedic disability means a serious limitation in ambulatory or motor functions.

II. COMMUNICATION DISABILITY: an impairment in the process of speech, language or hearing.

- A. Hearing impairment means a total or partial loss of hearing function which impedes the communication process essential to language, educational, social and/or cultural interaction.
- B. Speech and language impairments mean one or more speech/language disorders of voice, articulation, rhythm and/or the receptive and expressive processes of language.

III. LEARNING DISABILITY: a persistent condition of presumed neurological dysfunction which may exist with other disabling conditions. This dysfunction continues despite instruction in standard classroom situations.

To be categorized as Learning Disabled, a student must exhibit:

- A. Average to above average intellectual ability.
- B. Severe processing deficit(s).
- C. Severe aptitude-achievement discrepancy(ies).
- D. Measured achievement in an instructional or employment setting.

IV. ACQUIRED BRAIN IMPAIRMENT: a verified deficit in brain function which results in a total or partial loss of cognitive, communication, motor, psychosocial and/or sensory perceptual abilities.

V. DEVELOPMENTALLY DELAYED LEARNER: a student who exhibits the following:

- A. Below average intellectual functioning, and
- B. Potential for measurable achievement in instructional/employment setting.

VI. PSYCHOLOGICAL DISABILITY: a persistent psychological or psychiatric disorder, or emotional or mental illness.

- A. For the purposes of this subchapter, the following are not psychological disabilities:
 1. Transvestitism, transsexualism, pedophilia, exhibitionism, voyeurism, gender identity disorders not resulting from physical impairments, or other sexual behavior disorders.
 2. Compulsive gaming, kleptomania or pyromania, and
 3. Psychoactive substance abuse disorders resulting from current illegal drug use.