



**DISABILITY VERIFICATION FORM
FOR STUDENTS WITH LEARNING DISABILITIES**

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Students wishing to explore the possibility of a disability impacting upon their academic performance must pursue comprehensive evaluation to provide adequate documentation. The following is a detailed description of the required assessment components and report content.

I. Documentation:

Each student has the responsibility to secure appropriate documentation and present a copy to the Access, Disability Services, and Resources. ADSR adheres to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act (ADA) of 1990.

- LD evaluation must be current and appropriate given the understanding that learning abilities may change over time. It is in the individual's best interest to submit evaluations that were completed within the last 3 years of registration with ADSR.
- The report of the comprehensive evaluation (**Psychoeducational or Neuropsychological evaluation**) should reflect the incorporation of a diagnostic interview, assessment of aptitude, academic achievement and information processing, clinical interpretation and diagnoses.

If the documentation acquired does not adequately address the student's current functional impairment or explain how the condition limits a major life activity(s), additional information will be required.

Individual Education Program (IEP) and Prior Academic Adjustments in Secondary Settings: The transition from secondary schools to post-secondary institutions is quite demanding, in that, the student's responsibilities change as well as laws related to providing services to students with disabilities are different. An Individualized Education Program (IEP), a Comprehensive Evaluation Report (CER), or a 504 Plan **cannot** be substituted for adequate documentation to provide a rationale for academic adjustments, auxiliary aids, and/or services in the post-secondary setting, but can be a useful source of additional information.

II. Diagnostic Interview

An evaluation report should include the summary of a comprehensive diagnostic interview. Learning disabilities are commonly manifested during childhood, but are not always formally diagnosed. Relevant information regarding the student's academic history and learning processes in elementary, secondary, and post-secondary education should be investigated. The diagnostic interview may include: a description of the problem(s) being presented; developmental, medical, psychological, and employment histories; family history (including primary language of the home and the student's current level of English fluency); and a discussion of dual diagnosis where indicated.



III. Diagnostician

The diagnosis of a learning disability should be made by a professional such as a psychiatrist, educational psychologist, neurologist, or a combination of such professionals who have expertise in diagnosing learning disabilities in adults, as well as other psychiatric disorders which might resemble symptoms of Learning Disability. In addition, it is important that the diagnostician be able to screen for learning disabilities or other co-existing conditions.

IV. Assessment

The evaluation for the diagnosis of a specific learning disability must provide clear and specific evidence that a learning disability does or does not exist. The assessment, and any resulting diagnoses, should be based on a comprehensive evaluation that does not rely on any one test or subtest. Evidence of a substantial limitation to learning must be provided. The domains to be addressed must include the following:

- a. **Aptitude:** A complete intellectual assessment with all subtests and standard scores reported.
- b. **Academic achievement:** A comprehensive academic achievement battery is essential with all subtests and standard scores reported for those subtests administered. The battery should include current levels of academic functioning in relevant areas such as reading (decoding and comprehension), mathematics, and oral and written language.
- c. **Information processing:** Specific areas of information processing (e.g., short and long-term memory, sequential memory, auditory and visual perception/processing, processing speed, executive functioning and motor ability) should be assessed.

V. Test Scores

Standard scores and percentiles should be provided for all normed measures. The data should logically reflect a substantial limitation to learning for which the student is requesting accommodation. The test findings should document both the nature and severity of the learning disability. The particular profile of the student's strengths and weaknesses must be shown to relate to functional limitations that may necessitate accommodations. The tests should be reliable, valid, and standardized for the use with an adolescent/adult population.

VI. Specific Diagnosis

It is important to rule out alternative explanations for problems in learning such as emotional, attention-oriented, or motivational problems that may be interfering with learning, but do not constitute a learning disability. The diagnostician is encouraged to use direct language in the diagnosis and documentation of a learning disability, for example DSM terminology. If the data indicates that a learning disability is not present, then the evaluator should state that conclusion in the report.

VII. Clinical Summary

A well-written diagnostic summary based on the comprehensive evaluation process is a necessary component of the report. The clinical summary should include:

- a. Demonstration of the evaluator's having ruled out alternative explanations for academic problems.
- b. Indication of how patterns in the student's cognitive ability, achievement, and information processing reflect the presence of a learning disability.



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- c. Assessment of the substantial limitation to learning or other major life activity presented by the learning disability and the degree to which it impacts the individual in the learning context for which accommodations are being requested.
- d. A list of recommended accommodations and justification as to why specific accommodations are needed and how they address the academic needs associated with the specific disability.