



Student Disability Disclosure Form

Please complete on a computer or tablet and submit as a PDF file via email to sas@canton.edu.

This form may **ONLY** be completed by the student. Disclosure of a disability must be made by them, and how it impacts their academic performance should be made in their own words.

Semester: Fall Winter Spring Summer Year: _____

Today's Date: _____ Student ID Number: _____ Birthdate: _____

Name: _____ Pronouns Used: _____

Mobile Phone: _____ Additional Phone: _____

SUNY Canton Email: _____ Additional Email: _____

Preferred contact method: _____ Residence Halls Online Only Commuter Student

What is the name of your disability/diagnosis? (for example: dyslexia, autism, ADHD, anxiety, epilepsy, deaf, etc.)

Does Your Disability Affect?:

Reading

Testing

Focus

Writing

Notetaking

Organization

Math

Speech / Communication

Other: _____

For any checked items above, please describe or explain how your disability affects those areas:

Please complete this box for any items checked above.

What accommodations are you requesting, and why?

Please list any disability related medications you are taking:

Does this medication affect your learning? If yes, please explain:

Documentation of Your Disability / Diagnosis

I am including my documentation with this form.

I have already sent my documentation.

I will have my documentation sent.

This space may be used for any additional information you wish to include:

The Office of Student Accessibility Services serves as a National Voter Registration agency.
This office is proud to assist any student with filling out and submitting an application to vote.

Would you like help in becoming a registered voter?

I am already a registered voter.


No. I decline to register to vote at this time.

Yes. Please give me an application at my appointment.

Yes. Please mail an application to me.

**I choose to disclose my disability / diagnosis to the Office of Student Accessibility Services,
and I attest by my signature that I personally have completed this form.**

Directions for Digital Signature:

1. Click on the picture of the calligraphy pen tip, 
2. Click on "Add Signature"
3. Click on "Draw" and use your mouse or touch pad to sign inside the box
4. Click "Apply", drag it to the signature line, and click where you want it to go.
5. You can enlarge it by clicking on the large A.

Student Signature

Date

Please save and email this form to Student Accessibility Services at sas@canton.edu.