Eligibility for Services

The Disability Support Services (DSS) serves qualified students with disabilities to ensure equal access to college programs and services. A qualified student with a disability is a student with a disability, who meets the academic and technical standards required for admission or participation in the colleges’s educational program and services. As defined in the Americans with Disabilities Act (ADA), and section 504 of the Rehabilitation Act of 1973, a person has a disability if he/she

- Has a physical or mental impairment which substantially limits one or more major life activities, or
- Has a record of such impairment, or
- Is regarded as having such impairment

“Substantially limits” means either unable to perform a major life activity or significantly restricted as to the condition, manner or duration of performing the major life activity as compared to an average person.

In order to determine eligibility for services and fully evaluate requests for accommodations or auxiliary aids, the DSS requires documentation of the reported disability. The documentation must be current and should include an evaluation by an appropriate professional that clearly states what the impairment is, the current impact of the impairment on the student’s ability to participate in college educational programs and services, (functional limitations) and the relationship between the functional limitations and the accommodation(s) requested. Individual Education Plans (IEP), 504 plans, and/or an educational assessment Do Not constitute sufficient documentation. Once DSS receives the documentation, it is evaluated on a case-by-case basis.

The general guidelines listed below are developed to assist prospective students in working with the treating/diagnosing professional(s) to prepare the information needed to evaluate the request(s). If, after reading these guidelines, there are any questions, students can call the Rockville, Takoma Park/Silver Spring, or Germantown DSS counselors. These guidelines are based upon the Association on Higher Education and Disabilities (AHEAD) description of quality disability documentation. The DSS also has specific guidelines for students presenting learning disabilities, ADHD, and psychological disabilities.

• Credentials of the evaluator(s)

Documentation should be provided by a licensed or otherwise properly credentialed professional for the area being evaluated, who has undergone appropriate and comprehensive training, has relevant experience, and has no personal relationship with the individual being evaluated.

• A diagnostic statement identifying the disability

Documentation should include a clear diagnostic statement that describes how the disability was diagnosed, provides information on the functional impact, and details the typical progression or prognosis of the condition. When appropriate, it should include International Classification of Diseases (ICD) or Diagnostic Statistical Manual (DSM) codes; however, a full clinical description will also convey the necessary information.
• A description of the diagnostic methodology used

Documentation should include a description of the diagnostic criteria, evaluation methods, procedures, tests, and dates of administration as well as a clinical narrative, observation, and specific results. When appropriate, summary data and specific tests scores should be included.

• A description of current functional limitations

The current impact of the disability aids in establishing a disability and identifying accommodations. A combination of the results of formal evaluation procedures, clinical narrative, and self report is the most comprehensive approach to fully document the impact of a disability. The report should address severity, frequency, and pervasiveness of the condition.

While relatively recent documentation, typically three to five years old, is recommended in most circumstances, DSS uses professional judgment and discretion in accepting older documentation of conditions that are permanent and stable and evaluations that are based on adult norms.

• The expected progression or stability of disability over time

If possible, provide a description of the expected change in the functional impact of the condition(s) over time. If the condition is variable, describe the known triggers that may exacerbate the condition.

• A description of current and past accommodations, services, and/or medications

Documentation should include a description of both current and past medications, auxiliary aids, assistive devices, support services, and accommodations including their effectiveness in minimizing the functional impact of the disability. There should be a discussion of significant side effects from current medications or services that may impact physical, perceptual, behavioral, or cognitive performance. This information may provide insight into making current accommodation decisions.

• Recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or collateral support services

Recommended accommodations and strategies should be logically related to functional limitations or a clear explanation of that relationship is necessary to making current accommodation decisions. DSS will carefully consider accommodation recommendations but will make the final determination.

Information provided by public and private special education programs may be helpful but may not fully meet the DSS needs in terms of adequacy of documentation. Furthermore, some individuals with disabilities may not need documentation if the disability is permanent, observable, and stable. It is important to consult with DSS about the need for and appropriateness of documentation. If there are any questions about documentation guidelines, individuals should contact the DSS counselor.