



100 Campus Drive  
Academic Resource Center, Crawford Hall  
Grove City, PA 16127  
Disability Services Email: [DisabilityServices@gcc.edu](mailto:DisabilityServices@gcc.edu)

## General Guidelines for Documentation

In order to determine eligibility for services, the Disabilities Services Coordinator requires complete and current (within the last 3 years) documentation of the disability. The documentation should include an evaluation by a qualified professional that documents the current impact of the disability as it relates to the accommodation(s) requested. The diagnostician should be an impartial individual (i.e., not a friend or a family member of the student). Once documentation is received, it will be reviewed. We recommend that documentation be submitted well in advance of any accommodation request. The general guidelines listed below are developed to assist you in working with your treating/diagnosing professional(s) to prepare the information required to evaluate your request for services. If you have questions after reading these guidelines, please call the Disability Services Coordinator at 724- 264-4673 or email [DisabilityServices@gcc.edu](mailto:DisabilityServices@gcc.edu). Information may be sent via fax to 724-264-4669.

- **A diagnostic statement identifying the disability.**  
When appropriate, include International Classification of Diseases (ICD) or Diagnostic Statistical Manual (DSM) codes, the date of the most recent evaluation, or the dates of evaluations performed by referring professionals. If the most recent evaluation was not a full evaluation, indicate when the last full evaluation was conducted.
- **Current functional impact of the condition(s).**  
The current relevant functional impacts on physical (mobility, dexterity, endurance, etc.), perceptual, cognitive (attention, distractibility, rate of acquisition and retention, communication, etc.), and behavioral abilities should be described as a clinical narrative and/or through the provision of specific results from the diagnostic procedures/assessment.
- **Treatments, medications, accommodations/auxiliary aids, services currently prescribed or in use related to the disability.**  
Provide a description of treatments, medications, accommodations/auxiliary aids and/or services currently in use and their estimated effectiveness in minimizing the impact of the condition(s). Include any significant side effects that may impact physical, perceptual, behavioral or cognitive performance.
- **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.
- **Recommended accommodations and services.**  
Recommendations should be logically connected to the impact of the condition. When connections are not obvious they should be explained. Recommendations will be evaluated in the context of the course or program.

THE PRIORITY GOAL FOR GROVE CITY COLLEGE IS TO PROVIDE EQUAL ACCESS FOR ALL STUDENTS TO FACILITIES, PROGRAMS, COURSES AND SOCIAL LIFE.