It is the intent of the Wisconsin Indianhead Technical College (WITC) to fully comply with Section 504 of the Rehabilitation Act of 1973 (29 U.S.C & 794), the Americans with Disabilities Act (ADA) of 1990 (42 U.S.C & 1201. et seq.), the ADA Amendment Act of 2008. In accordance with these laws, WITC does not provide students with personal devices and services.

In order to assist students to successfully complete his/her selected program, WITC has developed a set of objective functional ability criteria. Students will be asked to sign the Functional Ability Criteria Statement of Understanding form stating whether or not they are able to meet the functional abilities, with or without accommodations, as stated in this document. If a student enters the program based on falsification of records related to their ability to meet functional requirements, he/she may face disciplinary action. The form signed at admission to the program will be kept on file in the student’s permanent record. If the student is required to sign the form again at a later date designated by the program requirements, the signed form will be kept on file in the student’s record maintained by the program director/faculty for five years, then destroyed.

For students with a disability, reasonable accommodations are available. Reasonable accommodations are defined as modifications or adjustments that allow individuals with disabilities to gain equal access and have equal opportunities to participate in WITC’s courses, services, activities, and use of the facilities. To be eligible for disability-related services/accommodations, students must have a documented disability. This documentation must be provided by a licensed professional, qualified in the appropriate specialty area. WITC is not obligated to provide an accommodation that requires a substantial change in the curriculum or alteration of an essential element or function of a program/course. WITC is also not obligated to provide an accommodation that poses an undue financial or administrative burden to the College or poses a direct threat to the health and/or safety of others.

Accommodations allowed, without disability documentation: supportive back brace or other supportive brace that does not impede required movement or interfere with infection control policies, hearing aids, glasses, and/or contacts. Other student-suggested accommodations will require the approval of the Program Director or Academic/Divisional Dean, the campus Accommodation Specialist, and the Wisconsin Department of Health Services (for Nursing Assistant only). All requests should be approved before the student is enrolled in the program. Any accommodation cannot substantially alter the requirements or nature of the program or provide accommodations that inflict an undue burden on the program.

If you are a person with a documented disability and would like to request accommodations, please contact the campus Accommodation Specialist at the campus number listed at the end of this document or on the Disabilities Pamphlet included in the inquiry packet of information. Requests are recommended to take place 30-days prior to class start date to allow time for accommodations to be coordinated. Requests for reasonable accommodation must be made with at least fourteen (14) calendar days’ notice prior to the first day the service is needed or as soon as possible.

A list of functional abilities the student must have in order to participate in his/her selected program at WITC is attached.

Program Specific Notices:

**Criminal Justice – Law Enforcement Academy Students:**
*If you are an individual with a disability under the ADA and you believe you need reasonable accommodations for the Criminal Justice - Law Enforcement Academy program, you should contact the Director, Criminal Justice Academy. Course requirements are based on bona fide occupational qualifications and will not be modified or waived. However, reasonable accommodations may be provided. In certain circumstances, you may be required to provide documentation for your disability and need for accommodation. This statement applies to both the classroom and scenario portions of the academy testing process.*

**Nursing Assistant Students:**
The Nursing Assistant program is highly regulated by state and federal law. OBRA, 1987 and State of Wisconsin, HFS 129, 2009 offer specific criteria for how the program will run, what is taught, how it is taught, mandated hours needed to be completed, and the ability of the nursing assistant to do the work required. In order to assist students to successfully complete the Nursing Assistant program and achieve certification to work through the Wisconsin Nurse Aide Registry, WITC has developed a set of objective functional ability criteria. All signed forms will be kept on file at the WITC Division of Allied Health office in Shell Lake, Wisconsin for three years and then destroyed.
The Americans with Disabilities Act (ADA) of 1990 (42 U.S.C & 1201. et seq.), the ADA Amendment Act of 2008, and Section 504 of the Rehabilitation Act of 1973 (29 U.S. C & 794) prohibits discrimination of persons because of her/his disability. In keeping with these laws, colleges of the Wisconsin Technical College System make every effort to ensure a quality education of students. The purpose of this document is to ensure that students acknowledge that they have been provided information on the functional abilities required for the program designated below:

- Advanced EMT
- Architectural Commercial Design
- Automated Packaging Systems Technician
- Automation for Industrial Systems
- Automotive Service Technician
- Automotive Technician
- Broadband Technologies
- Cosmetology
- Criminal Justice Studies
- Criminal Justice – Law Enforcement Academy
- Dental Assistant
- Early Childhood Education
- E-CHILD
- E-Connect – Child Care Services
- Emergency Medical Technician
- Emergency Medical Technician – Paramedic
- Gerontology – Aging Services Professional
- pre-Health Information Technology
- Health Information Technology
- Heating, Ventilation and Air Conditioning/Refrigeration (HVAC/R)
- Human Services Associate
- Industrial Maintenance Technician
- IT – Network Specialist
- IT – Systems Administration Specialist
- IT – Web and Software Developer
- Machine Tool Operation
- Machine Tool Operation - CNC
- Machine Tool Technician
- Machine Tooling Technics
- Marine Repair Technician
- Medical Assistant
- pre-Medical Coding Specialist
- Medical Coding Specialist
- pre-Nursing
- core Nursing
- Nursing Assistant
- pre-Occupational Therapy Assistant
- Occupational Therapy Assistant
- pre-Paramedic Technician
- Paramedic Technician
- Phlebotomy
- Power Sports Technician
- Residential Construction and Cabinetmaking
- Welding

This form can be completed at your program admission interview or prior to admission and turned in to Student Services.

I have read and understand the Functional Abilities Criteria specific to a student in this program.  
(initial/date)

I am able to meet the Functional Abilities Criteria as presented with or without accommodation.  
(initial/date)

I was provided with information concerning accommodations or special services if needed at this time.  
(initial/date)

_______________________________  ________________________________  ____________
Name of Student (please print)    Signature of Student    Date
GROSS MOTOR SKILLS
• Ability to sit for extended periods of time
• Ability to have repetitive, controlled arm/hand movement
• Ability to be able to crawl, kneel, and work in confined spaces
• Ability to keep or regain one’s body balance or stay upright when in an unstable position

FINE MOTOR SKILLS
• Ability to have manual dexterity needed for working on electronic devices for extended periods of time
• Ability to work with small objects as small as 2 millimeters and fine wires as small as 24 gauge
• Ability to work with small hand tools

PHYSICAL ENDURANCE
• Ability to perform physical activities that require use of entire body
• Ability to lift and move 50 pounds

HEARING
• Ability to focus on a single source of auditory (hearing) information in the presence of other distracting sounds
• Ability to detect or tell the difference between sounds that vary over broad ranges of pitch and loudness

VISUAL
• Ability to see with normal or corrected vision
• Ability to see fine color-coded wires and small objects
• Ability to see objects in the presence of glare or bright lighting

ENVIRONMENT
• Ability to work indoors in artificial light and in low-light conditions
• Ability to work in varied temperatures
• Ability to detect and tolerate strong odors, dirty or greasy areas, exposure to solvents, and slippery surfaces
• Ability to wear protective equipment when needed

MATH
• Ability to perform mathematical operations and calculations quickly and accurately
• Ability to apply logic where appropriate
• Ability to recognize and make precise measurements

EMOTIONAL STABILITY
• Ability to focus and work on a single task for extended periods of time
• Ability to appropriately function in a professional environment
• Adapt to changing environments and adjust to the unexpected
ANALYTICAL THINKING/CRITICAL THINKING

• Ability to analyze information and evaluate results to choose the best solution to solve problems
• Ability to tell when something is wrong or is likely to go wrong (problem sensitivity)
• Ability to come up with a number of ideas and solutions about a given topic
• Ability to creatively problem solve
• Ability to quickly make sense of information that seems to be without meaning or organization
• Ability to efficiently shift back and forth between two or more activities or sources of information
• Ability to sequence information
• Ability to think conceptually
• Ability to make decisions independently
• Ability to comprehend and follow instructions/processes

SPEECH AND COMMUNICATION

• Ability to read and comprehend information and ideas presented in writing
• Ability to communicate information and ideas in writing so others will understand
• Ability to communicate information and ideas in speaking so others will understand
• Ability to listen to and understand information and ideas presented through spoken words and sentences
• Ability to exhibit and comprehend nonverbal cues
REASONABLE ACCOMMODATION REQUEST FOR STUDENT

SECTION TO BE COMPLETED BY STUDENT

Name: ___________________________ Date of Request: ___________________________

Student ID#: ___________________________ Date Accommodation Needed: ___________________________

College Location: (circle one) Ashland Hayward Ladysmith New Richmond Rice Lake Superior Shell Lake

Describe the disability and how it affects your education:

________________________________________________________________________

________________________________________________________________________

Accommodation(s) you are requesting:

________________________________________________________________________

________________________________________________________________________

To ensure the provision of reasonable and appropriate accommodations, the student requesting services must provide current documentation of their disability. The documentation should provide information regarding the onset and severity of the disability, as well as describe how it interferes with educational achievement. In order to establish that an individual is covered under ADA and Section 504 of the Rehabilitation Act of 1973, documentation must demonstrate that the individual has a disability and it substantially limits and impacts the major life activity of learning. If accommodations, academic adjustments and/or auxiliary aids are being requested, the documentation provided must support the request. Appropriate accommodations will be determined based on the specific information submitted in the documentation. Please attach required documentation to this form. Complaint/appeals information is contained in Administrative Procedures J-111A, Reasonable Accommodation for Student with Disabilities.

Student Signature ___________________________ Date ___________________________

FOR COLLEGE USE ONLY

Accommodation is: _____ Approved _____ Not Approved

Accommodation Plan and Effective Date: ___________________________

________________________________________________________________________

Revisions or changes to above plan and date implemented:

________________________________________________________________________

Dean of Students Signature ___________________________ Date ___________________________

Reasonable Accommodation Request Form - June 2015