

Reasonable Accommodation Registration Form (New • Renew)

This form is for students with disabilities who wish to request reasonable accommodation. Reasonable accommodation is provided according to "Regulations on promoting the elimination of discrimination based on disabilities at Osaka University" based on Japanese government's Act for Eliminating Discrimination against Persons with Disabilities. Please complete this form and submit to "Office of student affairs" in your department.

To the Dean of School/Graduate School of ()

Date: y m d

in Hiragana		Nationality	First Language
Name			
Contact in your country	TEL: + () – Email :	Student ID Number	
Contact in Japan	TEL: + 81 () – Email :	Department/Programme	Year of study
in Hiragana	(Relationship to the student)	Department/ Course	
Next of kin		Class Teacher/ Supervisor	
Emergency	TEL: + 81 () – Email :		
Name of Disability		If you have Disability Certificate, please specify.	
		Grade	Type
Do you have Medical Certificate <input type="checkbox"/> YES <input type="checkbox"/> NO			
Summary of Symptoms; Please be specific			
Effect of Disability on Study	Traveling and access to classrooms <input type="checkbox"/> Reading <input type="checkbox"/> Writing <input type="checkbox"/> Notetaking <input type="checkbox"/> Speaking <input type="checkbox"/> Hearing <input type="checkbox"/> Vision <input type="checkbox"/> Concentration and Memory <input type="checkbox"/> Operating a PC <input type="checkbox"/> Exam and Assessment <input type="checkbox"/> Using audio-visual material <input type="checkbox"/> Using ICT <input type="checkbox"/> Using specified course material <input type="checkbox"/> Using Library <input type="checkbox"/> Undertaking practical work (e.g. experiment) <input type="checkbox"/> Organising workload and Managing times <input type="checkbox"/> Placement <input type="checkbox"/>		
Support/Accommodations you need	1. Accommodations you have previously received.		
	2. The accommodation you are requesting		
	Tick the Box; Equipment <input type="checkbox"/> Teaching and Learning Support <input type="checkbox"/> Personal Human Support <input type="checkbox"/> Study Strategy <input type="checkbox"/> Exam/Assessment <input type="checkbox"/> Communication <input type="checkbox"/> Other Support <input type="checkbox"/>		
Disclosure	The disclosure of your disability and relevant information to appropriate faculty and staff members will have vital role in accommodation process. <input type="checkbox"/> I consent to disclose the diagnosis of my disability.		

(Note)

- "Person with a disability" refers to a person with a physical disability, a person with an intellectual disability, a person with a mental disability (including developmental disabilities), and other persons with disabilities affecting the functions of the body or mind (hereinafter referred to collectively as "disabilities"), and who are in a state of facing substantial limitations in their continuous daily or social life because of a disability or social barrier.
- The information contained in this form is for educational purposes only.
- Please provide photocopied evidence of your disability. It should include a written statement or letter from a doctor or appropriate qualified professional. Submission of the request and documentation is not a guarantee that your alternative arrangements will be accommodated.
- Please be aware that the provision of accommodation in other academic institutions or any standardised test does not guarantee that the same accommodation will be entitled at Osaka University.

部局記入欄		HACC記入欄	
支援担当者(職員)	申請書受理日	担当者	申請書(写)受取日

☐ Agreement through Reasonable Accommodation Process is required

☐ Department-level support.