



Accommodations Renewal Form

Name: _____ Date: _____

R# _____ School (circle one): PLFSOM GGHSON GSBS

Note: GGHSON and GSBS students must renew accommodations every semester, PLFSOM students must renew every academic year.

_____ Yes, I would like to renew my accommodations for _____.
Dates (Semester or Year)

_____ My accommodation requirements have changed.
Note: Please make an appointment with Dr. Salazar to discuss

_____ No, I do not want to renew my accommodations.
Note: You can reactivate your accommodations at any time. See the DSS office for more information.

Student Signature

Date

DSS Staff Signature

Date