

CERTIFICATION OF TEMPORARY DISABILITY

The student named below has applied for services from the Student Disability Resource Center (SDRC) at UC Riverside. In order to determine eligibility and to provide services, we require documentation of the student's Disability. Under the Americans with Disabilities Act as Amended (ADAAA) of 2008 and Section 504 of the Rehabilitation Act of 1973, individuals with disabilities are protected from discrimination and may be entitled to reasonable accommodations. To establish that an individual is covered under the law, documentation must indicate that a specific disability exists and that the identified disability substantially limits one or more major life activities. A diagnosis of a disorder in and of itself does not automatically qualify an individual for accommodations. The documentation must support the requested accommodations.

Please submit the completed form to SDRC. The information you provide will *not* become part of the student's academic records, but will be kept in the student's file at SDRC, where it will be held in accordance with federal laws regulating privacy of student records. This form may be released to the student at their request. In addition to the requested information, please attach any other information you think would be relevant to the student's academic accommodations. Please contact us if you have questions or concerns. Thank you for your assistance.

Student's Name: _____ Student's UCR Email: _____

Today's Date: _____ Initial Date of Diagnosis (below): _____

Date Student was Last Seen: _____

What is the nature of the student's temporary health impairment?

DIAGNOSIS: _____

PROGNOSIS/DATE student can return to normal activities: _____

1. Please check which of the major life activities below are affected because of the temporary medical diagnosis.

Life Activity	No Impact	Moderate Impact	Severe Impact	Don't Know
Performing Manual Tasks/Writing				
Walking/Ambulation				
Sitting				
Standing				
Reaching				
Lifting				
Seeing/Reading				
Hearing				
Talking				
Thinking/Concentrating				
Information Recall				
Fatigue				
Breathing				
Eating				
Sleeping				
Caring for Oneself				
Other Limitations:				

