

ARC APPLICATION FOR SERVICES

Monterey Peninsula College provides educational services and access for students with verified disabilities who intend to pursue coursework at MPC. A variety of accommodations and services are available that afford eligible students with disabilities the opportunity to participate fully in all aspects of college programs and activities through appropriate and reasonable accommodations.

Completion of this form constitutes an agreement to apply for services through the Access Resource Center.								
ACADEMIC YEAR					MPC STUDENT ID#			
STUDENT NAME					DATE OF BIRTH			
STREET AD	DRESS							
CITY					STATE		ZIP CODE	
EMAIL								
PHONE	CELL			номе				
1. Check all that apply: I am an active client of the Department of Rehabilitation								selor's Name
 I understand that I must fulfill the requirements below for participation in the ARC program: I will complete this Application for Services. If I am eligible for services, I will receive printed information regarding the ARC service provision policies, and I understand there are consequences of failing to comply with the rules for responsible use of services. My rights and responsibilities are clearly defined on the ARC Student Rights and Responsibilities Statement. Before receiving services/accommodations through ARC, I must provide the documentation and/or forms (medical, educational, etc.) deemed necessary by ARC to verify my disability; disability verification must be from a physician and/or an appropriate licensed professional. Students are encouraged to obtain their verification of disability directly from a physician or professional in order to facilitate provision of services/accommodations as soon as possible. I will meet with an ARC Counselor/Specialist to complete an Academic Accommodation Plan (AAP) and agree to review and update my AAP at least once each academic year in order to continue services. I give my permission for ARC professionals to discuss my educational requirements with other professionals at Monterey Peninsula College who have a legitimate educational need to know. This authorization shall remain in effect during my enrollment until revoked by me in writing and signed by my ARC Counselor/Specialist. 								
Student Sig	gnature		Date	Counselor/Sp	oecialist Sigi	nature	1	Date