



1801 East Cotati Avenue  
Rohnert Park, CA 94928-3609

DISABILITY SERVICES FOR STUDENTS

*Division of Student Affairs*

707.664.2677 • Fax 707-664.3330 • Dial 711 for Relay  
www.sonoma.edu/dss

# Temporary Disability Accommodation Request

Student Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Cell#: \_\_\_\_\_

Seawolf ID: \_\_\_\_\_

SSU Email: \_\_\_\_\_@sonoma.edu

Date of Birth: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Temporary Disability: \_\_\_\_\_

## Accommodation(s):

What accommodations are you requesting at this time?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that all information maintained by Disability Services for Students (DSS) is part of my educational record and as such protected by the Federal Family Educational Rights & Privacy Act (FERPA).	
Student's Signature:	Date:

THE CALIFORNIA STATE UNIVERSITY

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