



Student Rights & Responsibilities

Disability Services

4400 University Drive, MS 5C9
Student Union Building 1, Suite 2500
Fairfax, VA 22030
Phone: (703) 993-2474
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Websites: ds.gmu.edu
Email: ds@gmu.edu

Name: _____

G#: _____

Disability Services recognizes that disability reflects diverse characteristics and experiences and is an aspect of integral to society and the university experience. To that end, Disability Services strives to promote the full participation of people with disabilities in all areas of university life. We collaborate with students, faculty, staff, and community members to create diverse learning environments that are usable, equitable, inclusive and sustainable. Disability Services is committed to upholding the legal, ethical, and philosophical principles of Section 504 of the Rehabilitation act of 1973, the 1990 Americans with Disabilities Act (ADA) and the ADA Amendments Acts of 2008(ADAA).

As a student with a disability at George Mason University, you have the **right** to receive the following services:

- Reasonable and effective accommodations according to your disability through an interactive intake and supporting documentation.
- Equal access to educational and co-curricular programs, services, jobs, activities, and facilities available through the university.
- To be treated with respect and dignity and receive equal and fair treatment.
- Confidentiality in all matters of your documentation and educational record.
- Information reasonably available in accessible formats.
- Access to a grievance process either through an informal or formal process. Please visit ds.gmu.edu/grievances for more information.

As a student with a disability at George Mason University:

- ***I understand*** that it is my responsibility to initiate services with Disability Services.
- ***I will*** provide appropriate documentation of my disability to Disability Services.
- ***I understand*** that it is my responsibility to request accommodations in a timely manner from Disability Services to ensure that they are in place as soon as possible. I also understand that I may request accommodations at any point during my time as a student at George Mason University.
- ***I am responsible*** for working in collaboration with Disability Services staff to determine reasonable accommodations.
- ***I am responsible*** for advocating for myself and monitoring my own progress, and will alert Disability Services if I need assistance with accommodation related issues as soon as possible.
- ***I understand*** that it is solely my responsibility to request my Faculty Contact sheets each semester. I will contact Disability Services by email, in person or via phone to request my Faculty Contact Sheets. I understand issuing Faculty Contact Sheets can take up to 3 business days.

- ***I acknowledge*** that it is my responsibility to provide my instructors with my Faculty Contact Sheets each semester in order to activate accommodations.
- ***I understand*** accommodations are not retroactive and start the time my professor receives my Faculty Contact Sheet.
- ***I will*** keep my documentation, contact and disclosure information up to date with Disability Services.
- ***I acknowledge*** that in order to use Disability Services Testing Center, I must follow all testing policies and procedures and that Disability Services testing center is available to provide appropriate testing accommodations. Please visit [Disability Services Testing Center \(http://ds.gmu.edu/testing\)](http://ds.gmu.edu/testing) for additional information.
- ***I agree*** to abide by the Mason Honor Code. Please visit the [Mason Honor Code \(http://oai.gmu.edu/the-mason-honor-code\)](http://oai.gmu.edu/the-mason-honor-code) for additional information.
- ***I acknowledge*** that Disability Services staff members can provided me with information regarding additional academic support resources available on campus.
- ***I agree*** to notify Disability Services if I need textbooks or other printed material, enlarged or otherwise formatted. I understand that Disability Services recommends this contact occur at least four weeks prior to the first day of classes of each semester. I agree to provide copies of my syllabi to assist in the delivery of these services.
- ***I understand*** that it is solely my responsibility to contact Disability Services if I have any classroom accessibility issues that I cannot solve independently.

I understand my rights and responsibilities as a student with a disability at George Mason University. I was informed of the services, activities, and programs offered by Disability Services. I understand the processes explained to me by Disability Services staff.

Student Signature

Date

Staff Signature

Date