

Victoria Beauty & Barber College

Disability Accommodation Policy

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Policy and Procedure
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Policy

The Disability Accommodation Policy is used to define the rights all students enrolled at Victoria Beauty & Barber College have concerning specific learning disabilities.

Procedure

- Victoria Beauty & Barber College respects all students from all backgrounds therefore the institution accepts students with disabilities, students who are dyslexic, and/or students with a specific learning disability.
- Accommodations are made with adequate space for their training.
- Students with disabilities may request reasonable accommodations to satisfy admission requirements, course completion and graduation requirements by submitting a written request to the Institute Director, who is also the coordinator for disability services.
- A student must submit a request for academic adjustments or auxiliary aids at least two (2) weeks before classes commence, or as soon as possible; however, the request is not retroactive.
- The request must include supporting documentation in the form of a documented physical, medical, or psychological condition which has been verified by a medical professional. Delays in submission of all required documentation shall delay a decision regarding the request for accommodation. The Institute Director has final say concerning the request.
- The institution will work with the student to provide necessary academic adjustments and auxiliary aids and services unless a particular adjustment would alter or waive essential academic requirements; fundamentally alter the nature of a service, program or activity; or result in undue financial or administrative burdens considering the Institute's resources as a whole.

Sample Documentation

- Auxiliary Aid Form

Victoria Beauty & Barber College

1508 North Laurent
Victoria, Texas 77901

AUXILIARY AID FORM

Student:

Academic Adjustments or Auxiliary Aid Request:

Discussion:

Proposed solution:

Director Comment:

Student Comment:

Student Signature: _____ Date _____

Director Signature: _____ Date _____