

NOTETAKER REQUEST FORM

After you have attended two classes, please return completed for to Disability Support Services. ***Course notes may not be provided when PowerPoint or instructor notes/outlines are available (either hard copy or on BlackBoard) prior to class meeting times.

Today's Date: _____

Student Name: _____

Phone #: _____

Email: _____

Have you attended all your classes at least two times? Yes No

Please list the classes you are requesting a notetaker for:

| Class Name | Section | Professor |
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Please indicate one of the following:

- 1. I will recruit my own notetakers
- 2. I would like DSS to recruit notetakers for my class(es).

If you checked # 2, please read each statement below carefully and initial.

_____ If I am not receiving notes on a weekly basis, I understand that it is my responsibility to inform Disability Support Services.

_____ I understand I am responsible for attending all classes and taking my own notes, as well.

_____ I will notify DSS if I drop or withdraw from any of the classes listed above.