

Equipment Request Form

Person Requesting Equipment:

Note: Person requesting services must be an eligible student of SSCC, meaning they have registered for classes at any of the four campuses of Southern State Community College and have been approved by the Office of Accessibility Services as needing such accommodations.

Student Name_____

Student ID _____

Student Phone #_____

Student Email_____

<u>Please Check Equipment you are Requesting:</u>

Smart Pen
Intel Reader
Victor Audio Reader
Stethoscope
Recorder
Notebook
Audiobooks

Needed for Course Number and Title (For example: MATH 117 CO1)

Signature	Request Date			
Coordinator of Learning Services & Accessibility Signature				
Approve / Disapprove (circle one)	Approval Date			