ALTERNATIVE FORMAT REQUEST

Kurzweil (Scanning)  E-Text  Audio Tape (Complete reverse side of form)  Braille  Large Print

Summer  Fall  Winter  Spring

Name___________________________  ID_________________________  Date____________________
Phone__________________________  Email________________________

Request:


By making this request, I AGREE TO:

• Use of any materials provided by OSD solely for my own educational purposes, and will not copy or duplicate them for use by others.

Signature__________________________  Date____________________

Alternative Format Request 12/18/2007
Instructions from the Student

WHICH OF THE FOLLOWING ITEMS ARE TO BE READ BY YOUR READER?
TO ANSWER, PLEASE CHECK “YES” OR “NO”

Table of Contents  O  YES  O  NO
Acknowledgements  O  YES  O  NO
Preface  O  YES  O  NO
Introduction  O  YES  O  NO
Footnotes  O  YES  O  NO

If Yes to Footnotes  O  End of Page  O  End of Chapter

References  O  YES  O  NO
Glossary  O  YES  O  NO
Index  O  YES  O  NO

General Guidelines for Readers

1. Communicate with the student at the beginning and throughout the quarter.
2. Spell words you have difficulty pronouncing.
3. Clarify what the student wants read. (talk to the student and refer to the instruction sheet)
   a. State the page number at the beginning of each page.
   b. If the student you are reading for has a visual disability, please describe tables, figures, and illustrations, and read the captions. If you are unable to describe them, make a reference to them and say where they can be found.