

This is not an application form for a Disabled Students' Allowance (DSA).

Support services for students with a disability or additional requirements



The Open University

Facility Request Form 1

Study materials, equipment and services

It is very important that you read the booklet *Meeting your needs before you fill in this form*.

If you don't have any additional requirements at this time, please just fill in Parts 1 and 2 of the form and then let us know if your situation changes in the future.

If you do not return this form within three weeks, we will assume you have no additional requirements.

You should return this form to your regional or national centre.

Part 1 Your details

I understand that you will treat the information I have provided on this form as confidential, and will pass it on to Open University (OU) staff and the University's agents, as appropriate, for the purpose of providing me with services and facilities as an OU student. I also understand that you may use the information as a basis for inviting me to take part in research unless I've already told the University (on my registration agreement) that I do not want to be contacted. I give you permission to process the information (including releasing it to other organisations that provide support services) for these purposes.

Your signature

Date

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Title

First name or names

Surname or family name

OU personal identifier

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Modules you are taking

(Only put one code in each box.)

Module

1	
2	

Start date

SUP 025815

Part 2 Your circumstances

Name of disability, health condition, mental health disability or specific learning difficulty.

Tick the appropriate boxes below (the numbers are for office use only) to tell us how your disability, health condition, mental health disability or specific learning difficulty affects you.

- | | | | |
|----------------------------|-------------------------------------------------|-----------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> 1 | Sight | <input type="checkbox"/> 7 | Mental health |
| <input type="checkbox"/> 2 | Hearing | <input type="checkbox"/> 8 | Personal care |
| <input type="checkbox"/> 3 | Mobility | <input type="checkbox"/> 9 | Fatigue (extreme tiredness) or pain |
| <input type="checkbox"/> 4 | Manual skills (difficulty handling items) | <input type="checkbox"/> 11 | Unseen disability (for example, diabetes, epilepsy or asthma) |
| <input type="checkbox"/> 5 | Speech | <input type="checkbox"/> 12 | Autistic spectrum disorder |
| <input type="checkbox"/> 6 | Specific learning difficulty (such as dyslexia) | <input type="checkbox"/> 10 | Other (please give details in the box below) |

If you have ticked the specific learning difficulties box, please indicate if you have been assessed. (If possible, please provide a copy of your assessment with this form.)

- assessed post-16
- not yet assessed

(This information is not stored for statistical and planning purposes.)

We will use the information you give us in Part 2 (but nothing that reveals your identity) for government statistics and to help us plan our services.

Part 3 How your disability affects your studies

Please tell us how your disability, health condition, mental health disability or specific learning difficulty affects you under the following headings (if they apply).

1 Travel and access to facilities

2 Reading printed materials

3 Producing written work (for example, course assignments and examination answers)

4 Taking notes (for example, in tutorials, lectures and residential schools)

5 Concentration and memory

6 Using audio-visual materials (for example, DVDs, CD-ROMs, websites and podcasts)

7 Speaking (for example, in groups, face-to-face and on the phone)

8 Hearing (for example, in groups, face-to-face and on the phone)

9 Using a computer

10 Using specific module software, multimedia materials or the virtual learning environment (for example, online tutorials)

11 Other (Please identify any questions or concerns you have about any other effects which are not covered above. You may attach a separate sheet if necessary.)

Communication from us

You will receive a lot of information from us in standard print on paper. If you need an alternative to this, please put a tick in the box and we will contact you about this later. (Please note that this is not a request for alternative format module materials – you can ask for those in Part 4 of this form.)

Other services associated with OU study

We will contact you separately to ask about any special arrangements you think you may need for your examination or assessment or for a residential school if your module has one.

Part 4 Facility requests

It's important that you read our booklet *Meeting your needs*, and the *Notes for filling in the Facility Request Form 1* on page 46, before you fill in this part of the form. These describe the facilities that are available and will help you make choices that are right for you. If you are eligible for a Disabled Students' Allowance, you should apply for this to fund your requirements under sections B and C. The OU will only provide study support that cannot be provided by a DSA.

A Module materials

- | | |
|--------------------------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> 277 Audio versions of printed material | <input type="checkbox"/> 278 Electronic text of printed material |
| <input type="checkbox"/> 3 Transcripts of broadcasts and audio-visual material | <input type="checkbox"/> 6 Braille labels |
| <input type="checkbox"/> 4 Comb-bound books (books with a spiral binding) | |

B Communication support (for D/deaf and hearing-impaired students only)

- | | |
|----------------------------------------------------------------|----------------------------------------------------------------------------|
| <input type="checkbox"/> 10 British Sign Language interpreter | <input type="checkbox"/> 13 Lip-speaker |
| <input type="checkbox"/> 11 Sign-supported English interpreter | <input type="checkbox"/> 14 Communicator for someone who is deaf and blind |
| <input type="checkbox"/> 12 Note-taker | |

C Equipment on loan

- | | |
|--------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> 7 Radio aid | <input type="checkbox"/> 15 Textphone |
| <input type="checkbox"/> 8 Access Technology Loan Scheme | <input type="checkbox"/> 30 Talking scientific calculator |
| <input type="checkbox"/> 231 Large-display Ti-83 calculator | <input type="checkbox"/> 233 Digital voice recorder |
| <input type="checkbox"/> 232 Portable CCTV (video magnifier) | <input type="checkbox"/> 273 DAISY Player |
| | <input type="checkbox"/> 272 PC-EYE Magnifier |

D Tutorial facilities (facilities vary and cannot be guaranteed)

- | | |
|-----------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> 16 Parking very near (with blue badge) | <input type="checkbox"/> 20 Access without using a lift |
| <input type="checkbox"/> 275 Parking very near (no blue badge) | <input type="checkbox"/> 21 Ground-floor room only |
| <input type="checkbox"/> 17 Wheelchair access | <input type="checkbox"/> 22 Room close to the entrance |
| <input type="checkbox"/> 18 Level access (no steps) | <input type="checkbox"/> 25 Nearby toilet |
| <input type="checkbox"/> 19 Easy access (few steps) | <input type="checkbox"/> 279 Room with hearing loop |

If you are not sure about what would be most useful or appropriate for you, or if you need some other form of support which is not included on this list, please contact the Learner Support Team in your regional or national centre.

We will do our best to provide services that help you to study effectively, but we can't guarantee that we will be able to provide all the services and facilities you ask for. If we can't do something you've asked for, we will try to suggest a suitable alternative.

Your Regional or National Disability Adviser must fill in this section

Date received			
Checked by			
Referred to			

Date			
Date			

Profile summary

General and educational implications

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Other information

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Facilities requested in discussion with an adviser (office use only)

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Flexibility with assignment (does not apply to computer-marked assignments or final tutor-marked assignments)

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Extra academic support

Advice given by

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Position

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Region/Nation

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Date

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