



Flexibility with Due Dates Agreement

Student Name: _____ Student ID Number _____
 Student's DRC Consultant: _____ Semester: _____
 Course Number and Section: _____ Instructor Name: _____

- List all types of assignments due during this class
 - Indicate for which types of assignments flexibility with due dates can be offered.
 - If flexibility cannot be offered, please briefly explain why.
 - Indicate the amount of additional time that can be offered per assignment.

Assignment Type	Flexibility Option?	Additional Time / Flexibility Denial Explanation

Indicate a maximum percentage of assignments that flexibility can be used for while maintaining course standards and student ability to complete the course by the end of the semester.

When and how will the faculty be notified of the use of the accommodation?

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Student: I agree to the flexibility and notification policy defined in this agreement. I acknowledge that this flexibility will only be used in connection with my disability and does not include assignments that are late for non-disability related reasons.

Student Signature:

Date:

Faculty: I agree to accept flexibility with due dates in accordance with this agreement when communicated through the notification policy.

Faculty Signature:

Date:

Approved by the DRC.

DRC Signature:

Date

In the event Faculty or Student cannot come to agreement contact the DRC Consultant.

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