



Assistive Technology Service Request Intake Form

Name of Individual: _____

NetID: _____ Email: _____

Primary Diagnosis: _____

Please indicate the areas in which there are access and/or functional needs concerns.

Reading

Classroom Participation

Taking Notes

Using interactive course software (e.g. Pearson MyLabs)

Using Blackboard

Other class activities:

Time Management

Please answer the questions below. Remember, "I do not know", or "N/A" are valid answers!

This form must be submitted prior to your meeting.

1. What devices/assistive technologies are you currently using?

A. How often are these items being utilized and for what purpose?

2. What type of training, if any, have you received?

3. What is your comfort level with using assistive technology?

4. What do you want to be able to do that you are currently unable to do, or experience difficulty doing?

5. What do you feel are your major learning strengths?

6. What are your major areas of concern regarding learning?

7. What has been suggested and tried in the past? If applicable, why was it not effective?

8. Are you interested in a particular technology, or preferred item(s)?

Specific Technology

11. Do you use a desktop or laptop computer? If yes, Windows or MAC? If using a computer with another operating system, please describe.

12. Do you use iTechnology (iPad, iPod, iPhone)? If yes, please specify which device(s) are being used.

13. Do you use tablet technology (Android, Microsoft Surface)? If yes, please describe apps being used.

Please choose the days and times that best fits your schedule for a one-hour meeting.

Monday	9:00AM-12:00PM	Wednesday	9:00AM-12:00PM	Friday	9:00AM-12:00PM
	2:00PM-4:00PM		2:00PM-4:00PM		2:00PM-4:00PM
Tuesday	9:00AM-12:00PM	Thursday	9:00AM-12:00PM		
	2:00PM-4:00PM		2:00PM-4:00PM		

Additional Comments:

Thank you for completing this questionnaire. The coordinator of the Alternate Media Resource Center will contact you to schedule an appointment to review your answers, and to more fully explore your options for assistive technology use.