

**WHITTIER LAW SCHOOL
FORM D
ACADEMIC ACCOMMODATIONS – ATTENTION DEFICIT/HYPERACTIVITY DISORDER
VERIFICATION**

(Please print or type; must be legible)

NOTICE TO APPLICANT: This section of this form is to be completed by you. The remainder of the form is to be completed by the qualified professional who is recommending academic accommodations during law school for you on the basis of Attention Deficit/Hyperactivity Disorder (AD/HD). Please read, complete, and sign below before submitting this form to the qualified professional for completion of the remainder of this form.

Applicant's full name: _____

I give permission to the qualified professional completing this form to release the information requested on the form, and I request the release of any additional information regarding my disability or accommodations previously granted that may be requested by Whittier Law School.

Signature of Applicant

Date

NOTICE TO QUALIFIED PROFESSIONAL:

The above-named person is requesting accommodations while enrolled at Whittier Law School. All such requests must be supported by a comprehensive evaluation report from the qualified professional who conducted an individualized assessment of the applicant and is recommending accommodations during law school on the basis of AD/HD. Whittier Law School also requires the qualified professional to complete this form. **If any of the information requested in this form is fully addressed in the comprehensive evaluation report, you may respond by citing the specific page and paragraph where the answer can be found.** Please attach a copy of the evaluation report and all records and test results on which you relied in making the diagnosis and recommending accommodations for the applicant during law school.

I. QUALIFICATIONS OF THE PROFESSIONAL *

1. Name of professional completing this form: _____

2. Address: _____

3. Telephone: _____ Fax: _____

4. E-Mail: _____

5. Occupation and specialty: _____

6. License number/Certification/State: _____

**The following professionals are deemed appropriate and qualified to provide a diagnosis of Attention Deficit/Hyperactivity Disorder (AD/HD): Clinical Psychologist, Neuropsychologist, Psychiatrist (must be licensed).*

Please describe your specialized training in the assessment, diagnosis and remediation of AD/HD with the adult population. A minimum of three (3) years of demonstrated experience with the adult population is considered appropriate and critical. If you are not one of the above three professions, please indicate why you are qualified to render this diagnosis and specifically, what training and experience qualifies you to conduct a differential diagnosis of AD/HD.

II. DIAGNOSTIC INFORMATION CONCERNING APPLICANT

1. Provide the date the applicant was first diagnosed with AD/HD: _____

2. Did you make the initial diagnosis? Yes No

If no, provide the name of the professional who made the initial diagnosis and when it was made, if known. Attach copies of any prior evaluation reports, test results, or other records related to the initial diagnosis that you reviewed.

3. When did you first meet with the applicant? _____
4. Provide the date of your last complete evaluation of the applicant. _____
5. Describe the applicant's **current** symptoms of AD/HD that cause significant impairment across multiple settings and that have been present for at least six months. Provide copies of any objective evidence of those symptoms, such as job evaluations, rating scales filled out by third parties, academic records, etc.

6. Describe the applicant's symptoms of AD/HD that were **present in childhood or early adolescence** (even if not formally diagnosed) that caused significant impairment across multiple settings. Provide copies of any objective evidence of those symptoms, such as report cards, teacher comments, tutoring evaluations, etc.

ATTACH A COMPREHENSIVE EVALUATION REPORT. The provision of reasonable accommodations is based on assessment of the *current* impact of the disability on the specific law school activities. Whittier Law School generally requires documentation from an evaluation conducted within the last five years to establish the current impact of the disability. The diagnostic criteria as specified in the *Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition* (DSM-IV-TR) (or most current version) are used as the basic guidelines for determination of an Attention Deficit/Hyperactivity Disorder (AD/HD) diagnosis. The diagnosis depends on objective evidence of AD/HD symptoms that occur early in the applicant's development and cause the applicant clinically significant impairment within multiple environments. Applicant self-report alone is generally insufficient to establish evidence for the diagnosis. Please provide a comprehensive evaluation report that addresses all five points below.

- A. Sufficient numbers of symptoms (delineated in DSM-IV-TR) of inattention and/or hyperactivity-impulsivity that have persisted for at least six months to a degree that is “maladaptive” and inconsistent with developmental level. The exact symptoms should be described in detail.
- B. Objective evidence that symptoms of inattention and/or hyperactivity-impulsivity that caused impairment were present during childhood.
- C. Objective evidence indicating that current impairment from the symptoms is observable in two or more settings. There must be clear evidence of clinically significant impairment within the academic setting. However, there must also be evidence that these problems are not confined to the academic setting.
- D. A determination that the symptoms of AD/HD are not a function of some other mental disorder (such as a mood, anxiety, or personality disorder; psychosis; substance abuse; low cognitive ability; etc.).
- E. Indication of the specific AD/HD diagnostic subtype: predominantly inattentive type, hyperactive-impulsive type, combined type, or not otherwise specified.

III. FORMAL TESTING

Psychological testing and self-report checklists cannot be used as the sole indicator of AD/HD diagnosis independent of history and interview. However, such findings can augment clinical data. They are particularly necessary to rule out intellectual limitation as an alternative explanation for academic difficulty, to describe type and severity of learning problems, to document the need for extended time accommodations for exams, and to assess the severity of cognitive deficits associated with AD/HD (inattention, working memory, etc.).

1. Is there evidence from empirically validated rating scales completed by a source other than the applicant that levels of AD/HD symptoms fall in the abnormal range?

Yes No

If yes, please provide copies.

2. Is there evidence from empirically validated rating scales completed by a source other than the applicant that the applicant has been significantly impaired by AD/HD symptoms?

Yes No

If yes, briefly describe the findings.

3. Was testing performed that rules out cognitive factors as reasonable explanations for complaints of inattention, distractibility, poor test performance, or academic problems?

Yes No

If yes, briefly describe the findings.

4. Was testing performed that rules out psychiatric factors (anxiety, depression, etc.) or test anxiety as reasonable explanations for complaints of inattention, distractibility, poor test performance, or academic problems?

Yes No

If yes, briefly describe the findings.

5. Was testing performed to assess the possibility that a lack of motivation or effort affected test results?

Yes No

Describe the findings, including the results of symptom validity tests.

6. If additional time is being requested for exams, a full assessment of cognitive abilities is required. If the applicant takes medication for their ADHD, all testing must be completed while taking the medication and this must be noted in the report. It is important that the tests used in the evaluation are reliable, valid, and age-appropriate, and that the most recent

edition of each diagnostic measure is used. Scores should be reported as age-based standard scores and percentiles. The following lists of tests are provided as a guide to assessment instruments appropriate for the adult population. The lists are not intended to be all-inclusive and will vary with the needs of the individual being evaluated.

Aptitude/Cognitive Ability

- Wechsler Adult Intelligence Scale IV (WAIS IV) (or most current version) (including IQ, index, and scaled scores), or
- Woodcock-Johnson III (WJ III): Tests of Cognitive Ability, or
- Stanford-Binet Intelligence Scale (5th ed.), or
- Kaufman Adolescent and Adult Intelligence Test

Please note: The Slossen Intelligence Test and the Kaufman Brief Intelligence Test are primarily screening instruments and should not be considered comprehensive measures of aptitude/cognitive ability.

Achievement (must include timed as well as untimed measures from the following instruments)

- Woodcock-Johnson III (WJ III): Tests of Achievement, or
- Wechsler Individual Achievement Test (WIAT-III), or
- Scholastic Abilities Test for Adults (SATA)

In addition, a timed reading comprehension measure, which has been normed on adults and which allows for both extended and regular administration, is required. The Nelson-Denny Reading Test (NDRT) is the most commonly used measure for this purpose. Extended-time testing should be completed when all items are not completed under the standard-time administration, with notation of the actual additional time used to complete the test (not the time allowed). The number of items attempted and completed during the regular and extended periods is also required. If a test other than the NDRT is used, a detailed description of the test and the norming sample should also be included. Note that the WJ-III and the WIAT-III do not measure sustained timed reading comprehension.

Please note: The Wide Range Achievement Test (WRAT) and the Peabody Individual Achievement Test (PIAT) are not comprehensive measures of academic achievement and should not be used as sole measures in this area.

IV. AD/HD TREATMENT

Is the applicant currently being treated for AD/HD? Yes No

If yes, describe the type of treatment, including any medication, and state the extent to which this treatment is effective in controlling the AD/HD symptoms. If it is effective, explain why accommodations are necessary.

If no, explain why treatment is not being pursued.

V. ACCOMMODATIONS RECOMMENDED (check all that apply)

Classroom and Exam Accommodations

- Permission to audiotape class lectures
- Access to large print material (check one: 18 pt. 24 pt. Other _____)
- Semi-Private Room for Exams
- Extra Time for Exams (please specify) _____
- Other (please specify): _____

Please provide rationale for requests indicated:

VI. PRIOR HISTORY AND PAST ACCOMMODATIONS

Please describe any previously documented history of AD/HD and list accommodations that have been granted to the applicant in the past:

VII. CONFIDENTIALITY

Confidentiality policies of Whittier Law School will be followed regarding its responsibility to maintain confidentiality of this form. No part of the form or the diagnostic report will be released without the applicant’s written consent or under the compulsion of legal process.

VIII. CLINICIAN/LICENSED PROFESSIONAL’S SIGNATURE

I attach hereto copies of all test results, evaluations, educational or psychological reports that I relied upon in making this diagnosis of the applicant’s condition/disability (notes and worksheets are not required as part of this submission). **This is required.**

I declare under penalty of perjury under the laws of the State of California that the above information is true and correct.

(Signature of Licensed Professional)

(Date)

Whittier Law School reserves the right to make final judgment concerning accommodations and may have all documentation related to this matter reviewed by a panel or professional consultants if deemed necessary.