Questionnaire for Students with Disabilities

If you have a disability, this form is an opportunity to let the University have a better understanding of what help you may need so that we can provide appropriate assistance to facilitate your learning here.

The information collected in this form will be used by different facility centres and departments of the University for offering of assistance to disabled students and for statistical purpose. The Academic Regulations and Records Office will co-ordinate the collection of such information and make appropriate referrals to the teaching department, and other service providers such as the Library and Student Development Services. All information collected will be kept confidential and used on a need-to-know basis. Whilst there are limits to the level and amount of services which can be provided, individual departments may contact you further to discuss the services and assistance they can offer.

After completing the form, please return it to the Academic Regulations and Records Office Service Centre. Thank you for your co-operation.

Student Name: ___________________________  Student No.: _____________________________
Day time Telephone No.: ___________________  Programme Code: _________________________
CityU E-mail Address: _____________________  ProgrammeTitle: __________________________

1. Please briefly describe your disability:
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

2. Do you need special assistance for travelling to the campus? If yes, how is it arranged?
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

3. Do you need special arrangements when attending lectures?
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

4. Do you need assistance or special equipment in your studies and in completing course assignments?
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

5. Do you envisage any activities in your study programme that you cannot attend, such as field trips, laboratory work, etc.?
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

6. Do you need special arrangements and equipment or extra time for examinations?
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

_______________________           __________
Signature of Student     Date