Student Rights and Responsibilities

Otis College of Art and Design
Disability Services
Phone: (310) 846-2554   Fax: (310) 665-6964

Student Rights

❖ My participation in the Disability Services shall be entirely voluntary.
❖ Receiving support services or instruction authorized through Disability Services shall not preclude me from participating in any other course, program, or activity provided by the College.
❖ Personal information will be kept confidential in order to protect against unauthorized disclosure. Portions may be shared with the Dean’s Office of Otis College of Art and Design or state or federal agencies; however, disclosure to these parties is made in strict accordance with applicable statutes regarding confidentiality, including the Family Educational Rights and Privacy Act (20 U.S.C. 1232 (g)), Pursuant to Section 7 of the Federal Privacy Act (Public Law 93-579; 5 U.S.C. §552a, note). The information is being collected pursuant to California Education Code Sections 67310-67312, and 84850; and California Code of Regulations, Title 5, Section 56000 et seq.

Student Responsibilities

❖ I will provide the Disability Services with the necessary information, documentation and/or forms to verify my disability-related functional limitations.
❖ I will utilize the Disability Services in a reasonable manner. I understand that the Disability Services has service provision policies and procedures which must be adhered to for continuation of services (e.g. sign language, interpreting, note taking, and test accommodations).
❖ I will comply with the Otis College of Art and Design Student Code of Conduct and all other applicable laws and regulations related to student conduct, as detailed in the College catalogue.
❖ I understand that I am to meet with the Assistant Dean of Student Affairs once each semester of enrollment, or at least once each academic year to discuss my goals, learning strategies, or use of accommodations.

I understand and agree to the above Student Rights and Responsibilities. I have been given a copy of this document. If I do not comply with these rights and responsibilities, I will be notified in writing of my pending suspension of services. I will have the opportunity to appeal the decision relating to issues pertaining to the Student Conduct Code by contacting the Dean of Students at 310-665-6961. For issues concerning academic adjustments I will have the opportunity to appeal the decision by contacting the ADA 504 compliance Officer at 310-846-2554.

Student Signature: __________________________  Date: __________________
Student Name (Print): _______________________

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