



## **CRAFTON HILLS COLLEGE DISABLED STUDENTS PROGRAMS & SERVICES (DSPS) STUDENTS RIGHTS & RESPONSIBILITIES**

### **Student Rights**

- Participation by students with disabilities in Disabled Student Programs and Services shall be entirely voluntary.
- Receiving support services or instruction authorized under this subchapter shall not preclude a student from also participating in any other course, program or activity offered by the college.
- All records maintained by DSPS personnel pertaining to students with disabilities shall be protected from disclosure and shall be subject to all other requirements for handling of student records. (Section 56008)

Note: Authority cited: Sections 67312, 70901, and 84850, Education Code. Reference: Sections 67310-12 and 84850, Education Code.

### **Student Responsibilities**

- I will provide DSPS with information, documentation and forms (medical, education, etc.) deemed necessary by DSPS to verify my disability.
- I will meet with a Certificated DSPS Staff to complete my Academic Accommodation Plan and to update each semester.
- If I use interpreters, readers, tutors and/or other DSPS assistants, or scheduled LD assessment or alternative media appointments, I am responsible for notifying the appropriate DSPS staff to any planned absences or appointments. I understand that two unnotified and unexcused absences may result in suspension of services from DSPS, which may include withdrawal from the LRC 907 and/or LRC 925 classes.
- I will comply with the student code of conduct adopted by the college and all other applicable statutes and regulations related to student conduct.
- I will be responsible of my use of DSPS services and adhere to written service provision policies adopted by DSPS.
- I will make measurable progress toward the goals established in my Academic Accommodations Plan (AAP) or, if enrolled in a regular college course, meet academic standards established by the college. (Section 56010)

Note: Authority- cited: Sections 67312, 70901, and 84850, Education Code. Reference: Sections 67310-12 and 84850, Education Code.

By signing this I understand that I must comply with relevant DSPS policies and procedures. I further give permission for DSPS Program Staff to discuss my education situation with other professionals who have a legitimate educational need to know. My signature also acknowledges that I have received a copy of the Students Rights & Responsibilities.

\_\_\_\_\_ Date \_\_\_\_\_  
Student Signature

\_\_\_\_\_ Date \_\_\_\_\_  
DSPS Certificated Staff Signature