



CLAREMONT
SCHOOL OF
THEOLOGY

**CONSENT AND AUTHORIZATION TO DISCLOSE
ACCESSIBILITY|DISABILITY(IES) INFORMATION**

In order to provide reasonable accommodation, it is sometimes necessary to discuss the documentation the student has submitted to the Claremont School of Theology (CST) Accessibility|Disability Director with providers such as licensed physicians, psychologists or other qualified professionals, as well CST faculty and professional staff. I understand that if I am taking coursework through cross-registration at Academy of Jewish Religion, California, University of the West, Willamette University, or Bloy House, and would like accommodations at these affiliated and partner schools, it is necessary to allow for release of information to these partners' designated Accessibility|Disability office.

I hereby grant permission for the CST Accessibility|Disability office to discuss my accessibility and/or disability accommodations request; to exchange information regarding the documentation I have submitted to CST with my provider(s) (physician, psychologist, or other qualified professional) and to request accommodation from Claremont School of Theology, Academy of Jewish Religion, California, University of the West, Willamette University and Bloy House's faculty and professional staff.

This authorization will remain in effect for the duration of my enrollment. I understand that I may revoke this release of information privilege at any time by informing, in writing, the CST Accessibility|Disability Director.

I understand that this information is to assist with my education and request for accommodation. I further understand that my refusal to authorize consent, may result in a denial of specific accommodations.

I acknowledge that my accessibility|disability documentation will be kept on file for five years and that I have been informed to keep copies of all accessibility|disability paperwork.

Student Signature: _____ Date: _____