Dear College of the Siskiyous Instructor,

The Disabled Students Programs and Services (DSPS) office is requesting your assistance in obtaining the authorized accommodation of class notes for one of your students. You can do one of the two following options to assist this student:

1) Provide the student with a copy of your lecture/PowerPoint notes at the beginning of class so they can follow along.

2) Help the student find a Peer Note-taker. If you choose this option, please keep the identity of the disabled student confidential until you have identified a Peer Note-Taker.

Once the Peer Note-Taker is identified, please meet with both students to exchange the Peer Note-Taker Agreement (attached). If you have any questions or concerns regarding this matter, please contact our office at 530-938-5297.

Please read the following notice to your class and give the identified Peer Note-taker the Agreement after class. Thank you for your support of students with disabilities at College of the Siskiyous!

Sunny Greene, DSPS Director/Counselor

NOTICE TO BE READ ALOUD TO CLASS:

Attention Students: You can help a fellow student and have the option to receive a letter of appreciation for sharing your notes with a classmate!

The office of Disabled Students Programs & Services is seeking motivated individuals willing to share their notes with students qualified to receive this service.

The eligible student will provide lined carbonless (NCR) paper for you to take notes.

This is a way for you to help a fellow student and yourself- it’s a WIN/WIN situation!

If you would like to share your notes, please see me after class to obtain the Peer Note-taker Agreement and meet with the eligible student.
PEER NOTE-TAKER AGREEMENT

Note-taker: It is your responsibility to complete this form and return it to the Disabled Students Programs and Services (DSPS) office in Eddy Hall no later than _________________ (date). If you have any questions, please call 530-938-5297.

Thank you for agreeing to share your notes! We appreciate your assistance. If you would like a letter of appreciation after the semester is completed, please let us know and we will be happy to provide a letter for you.

Please print:

I, (peer note-taker) ____________________________, agree to share my classroom notes with ____________________________, a qualified student in (class name) _______________________.

Qualifying Student: It is your responsibility to do the following:

1) If you drop this class, you must notify DSPS immediately.

2) Pick up the note paper from DSPS for your note-taker.

PLEASE PRINT:

Note-taker Name: ____________________________ Student #: S000______________

Phone number: _______________________ COS email: ___________________________

Request Letter of Appreciation? Yes: ______ No:_______

Date Note-Taking Began for Student: _________________ Qualifying Student Initials: _____

Date Note-Taking Stopped for Student: _________________ Qualifying Student Initials: _____

Note-taker Signature: ____________________________ Date: ______________________

DSPS Signature: ________________________________ Date: ______________________