

Office of AccessAbility Services

Request for Reconsideration

For students who would like to request reconsideration, you have the right to submit a Request for Reconsideration.

This is an interactive process between the student and OAS to gather and evaluate additional relevant information related to your concern. Please note that a mere disagreement with an OAS decision is unlikely to result in a different decision.

Please indicate your Request for Reconsideration by completing the information below. Note: if you feel that providing a written statement does not allow you to express yourself clearly and completely, please contact OAS directly. We will be glad to meet and talk through this information directly with you.

Name:	Legal Name <i>(if different)</i> :	
Student ID Number:	Date of Birth:	
Gender Identity:	Preferred Pronouns:	
Mailing Address:		
<i>City</i>	<i>State</i>	<i>Zip Code</i>
Phone Number:		
Email Address:	@student.goodwin.edu	

Please include a personal statement. In one page or less, please share what accommodation/service you would like to be re-reviewed, and how it addresses the functional impact(s) you are experiencing related to your disability.