This is a contract for the following course: __________________________, in which a course substitution may be requested in the future due to disability-related needs that have interfered with my successful completion of that course. In this contract, I agree to utilize the following accommodations in accordance with federal and state laws and California Community College policies, and to follow the “Plan of Action” below.

- Extended Time on Tests
- Tutoring (1-2 Hours/Week)
- Notetaker
- Other: __________________________
- Computer
- Other: __________________________
- Tape Recorder
- Other: __________________________

**PLAN OF ACTION**

**Required Commitment**
1. Meet class attendance standards (minimum).
2. Commit to studying at least two hours for every hour in class (minimum).
3. Turn in quality assignments complete and on time.
4. Meet with a DSPS Counselor or LD Specialist at least twice during the semester.
5. Obtain all required textbooks within the first week of class.

**Other Requirements**
- Reduce work hours to _____ per week
- Limit total units to _____ per semester
- Practice study skills strategies
- Study groups
- Meet instructor every 3 weeks during semester
- Develop time management schedule
- Other: __________________________

After discussing my plan for success in this course with my Counselor, I commit to the above strategies. If I encounter any difficulties, I will contact my DSPS Counselor immediately.

______________________________   _______________________________
Student Signature                  Date

______________________________   _______________________________
DSPS FACULTY                  Date