



The University of Georgia

Regents' Center for Learning Disorders

Documentation Checklist for Systemic Disorders

Name:

DOB:

Status:

Enrollment Term:

GENERAL REQUIREMENTS

- Documentation within three years or meets exceptions? Date:
- Diagnosis clearly stated? Date:
- Examiner credentials: (Licensed, Certified, etc.)

DIANOSTIC INFORMATION

- History of condition
- Duration of condition (chronic, episodic, or short term)
- Severity of condition (mild, moderate, severe)
- DOCUMENTATION ACCEPTED**

SYMPTOMS

Describe symptoms relating to the diagnosis.

FUNCTIONAL LIMITATIONS (how condition affects student academically and/or physically)

Consider limitations related to prescribed medications.

ASSISTIVE TECHNOLOGY

ACCOMMODATIONS NOTES