



## Acknowledgement of Program Functional Abilities

## 1. Complete the Student Information Section (Print clearly)

Name (First, MI, Last):			Student ID:		
Last four digits of your SSN:	x x x - 2	X X	Date of Birth:		
Prior last name/s/:					
2. Check your		Advanced EMT 30-531-6			Law Enforcement Academy 30-504-1
Program of Study		Barber Technologist 30-502-5 Cosmetology 31-502-1			Medical Assistant 31-509-1 Nursing Assistant 30-543-1
You may check all programs to which you have applied once you have read the related functional abilities.		Community Pharmacy Technician 30-536 Culinary Arts 10-316-1 Dental Assistant 31-508-1 Emergency Medical Technician 30-531-3 EMT-Paramedic 31-531-1 Early Childhood Education (ECE) 10-307-2 Preschool Credential Certificate 90-307-6 -see ECE functional abilities	1		Nursing 10-543-1 LPN to ADN Bridge 10-809-2 -See Nursing functional abilities Gerontological & Rehabilitative Nursing 10-810-21 -See Nursing functional abilities Paramedic Technician 10-531-1 Physical Therapist Assistant 10-524-1
		Health Unit Coordinator 30-510-2 Instructional Assistant 10-522-2			Surgical Technology 10-512-1 Fire Protection Technician 10-503-2

**3.** Find the list of functional abilities for your program (see <u>www.gtc.edu/forms-publications</u>). Click on the link to your program's functional abilities under Program Admissions Forms. Read each identified function carefully.

## 4. Read about ADA and Functional Abilities below

The Americans with Disabilities Act of 1990 and Section 504 of the Rehabilitation Act of 1973 prohibit discrimination against individuals because of a disability. In keeping with these laws, Gateway Technical College and its programs have developed lists of essential functions for each program to inform prospective students of the abilities required of students. Students with disabilities have the right to request reasonable accommodations from the college and the program, as necessitated by their disability.

Students who feel that they can master the essential functions listed above, with or without reasonable accommodations, are encouraged to enroll in the program. If requested, the college and the program are willing to consider adjustments and modifications. Information is available on reasonable accommodations to meet the Functional Abilities upon the applicant's request. Please see <a href="https://www.gtc.edu/student-services/disability-services">www.gtc.edu/student-services/disability-services</a> for information on accessing services.

## 5. Sign below - By signing below, I certify that

- I have read and understand the Functional Ability Criteria specific to a student in my program indicated above in Section 2,
- I am able to meet the functional abilities as presented with or without accommodation, and
- I understand that I may receive information concerning accommodations or special services if needed upon my request.

Signature

Date

**NOTE:** Forms that are missing information or not signed will be returned to you. This may delay admission to your program. The program you indicate above must be the program you have applied to. This form must be completed for each program requiring acknowledgement of functional ability requirements. If you have applied to more than one program with this requirement, a new form must be completed for each of those programs.