



0111110



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 - X X - _____

Date of Birth: _____

Prior last name/s/: _____

2. Check your Program of Study

You may check all programs to which you have applied once you have read the related functional abilities.

- Advanced EMT 30-531-6
- Barber Technologist 30-502-5
- Cosmetology 31-502-1
- Community Pharmacy Technician 30-536-1
- 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) 10-307-1
- Preschool Credential Certificate 90-307-6
-see ECE functional abilities
- Health Unit Coordinator 30-510-2
- Instructional Assistant 10-522-2
- Law Enforcement Academy 30-504-1
- Medical Assistant 31-509-1
- Ophthalmic Medical Assisting Technician 90-509-5
-See Medical Assistant functional abilities
- Nursing Assistant 30-543-1
- 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
- Gerontological & Rehabilitative Nursing 90-543-5
-See Nursing functional abilities
- Paramedic Technician 10-531-1
- Physical Therapist Assistant 10-524-1
- Surgical Technology 10-512-1
- Fire Medic 10-531-2
-See Fire Protection Technician functional abilities

3. Find the list of functional abilities for your program (see www.gtc.edu/forms-publications). 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 www.gtc.edu/student-services/disability-services 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.