

ALTERNATIVE TEXTBOOK REQUEST FORM

Student Name: _____ A #: _____
 UAH Email Address: _____ Phone #: _____
 Semester: _____

In order to receive a textbook or course material in an electronic format, the student MUST:

1. Officially register with DSS and have a documented disability that requires electronic texts as a reasonable academic adjustment supported by documentation.
2. Enroll in courses at UAH for the semester that the electronic text or course material is requested.
3. Purchase a copy of any textbook or course pack for which electronic format is requested (this is a copyright requirement).
4. Sign the Student Acknowledgement Statement on this form.
5. Complete and submit this form for the textbooks requested. If the student's schedule changes and different texts are required, the student must fill out a new form for the changes.
6. Since DSS must process all requests through the book's publisher and publishers can take up to six weeks to respond to a request, it is important that all requests be submitted as soon as possible, preferably before the semester begins. Form can be submitted in person or electronically.

Student Acknowledgement Statement

I understand that an electronic copy of a text is a personal copy, and that it is a copyright violation to sell or reproduce the electronic text. I understand that I must purchase a paper copy of the text in order to request an electronic copy. I understand that if I sell any text, I must delete the electronic copy of the text from my computer or other hardware. I acknowledge that Disability Support Services may not edit or revise alternative format texts it receives from publishers. *I have read and understood the above statements and assume full responsibility for these materials and the conditions of this loan agreement.*

Student signature: _____ Date: _____

If submitting electronically, by typing your name you are signing this document electronically and agreeing your electronic signature is the legal equivalent of your manual signature on this document.

Please fill out the following information for any textbook that you would like to have requested. Please type or print legibly.

TEXT
#1

Text Title

FOR DSS OFFICE USE ONLY

- Requested from publisher: Initial _____ Date _____
- Received from publisher: Initial _____ Date _____
- Student notified: Initial _____ Date _____
- Transferred to student: Initial _____ Date _____

TEXT #2

Course Number and Section

Course Name

Instructor's Name

Text Title

Author

Edition

Publisher

ISBN

Date Purchased

Location Purchased

Price Paid

FOR DSS OFFICE USE ONLY

Requested from publisher: Initial _____ Date _____

Received from publisher: Initial _____ Date _____

Student notified: Initial _____ Date _____

Transferred to student: Initial _____ Date _____

TEXT #3

Course Number and Section

Course Name

Instructor's Name

Text Title

Author

Edition

Publisher

ISBN

Date Purchased

Location Purchased

Price Paid

FOR DSS OFFICE USE ONLY

Requested from publisher: Initial _____ Date _____

Received from publisher: Initial _____ Date _____

Student notified: Initial _____ Date _____

Transferred to student: Initial _____ Date _____

TEXT #4

Course Number and Section

Course Name

Instructor's Name

Text Title

Author

Edition

Publisher

ISBN

Date Purchased

Location Purchased

Price Paid

FOR DSS OFFICE USE ONLY

Requested from publisher: Initial _____ Date _____

Received from publisher: Initial _____ Date _____

Student notified: Initial _____ Date _____

Transferred to student: Initial _____ Date _____

TEXT #5

Course Number and Section

Course Name

Instructor's Name

Text Title

Author

Edition

Publisher

ISBN

Date Purchased

Location Purchased

Price Paid

FOR DSS OFFICE USE ONLY

Requested from publisher: Initial _____ Date _____

Received from publisher: Initial _____ Date _____

Student notified: Initial _____ Date _____

Transferred to student: Initial _____ Date _____

TEXT #6

Course Number and Section

Course Name

Instructor's Name

Text Title

Author

Edition

Publisher

ISBN

Date Purchased

Location Purchased

Price Paid

FOR DSS OFFICE USE ONLY

Requested from publisher: Initial _____ Date _____

Received from publisher: Initial _____ Date _____

Student notified: Initial _____ Date _____

Transferred to student: Initial _____ Date _____

TEXT #7

Course Number and Section

Course Name

Instructor's Name

Text Title

Author

Edition

Publisher

ISBN

Date Purchased

Location Purchased

Price Paid

FOR DSS OFFICE USE ONLY

Requested from publisher: Initial _____ Date _____

Received from publisher: Initial _____ Date _____

Student notified: Initial _____ Date _____

Transferred to student: Initial _____ Date _____