

Faculty Request for Fundamental Alteration Review

The University of California is committed to ensuring that students with disabilities are provided with full and equal access to its programs, services, and activities. Academic requirements should be modified, as necessary and appropriate, to ensure that they do not discriminate or have the effect of discriminating, on the basis of disability, against qualified applicants or students with disabilities. This commitment includes making alterations and adjustments to courses or programs unless doing so would (a) modify academic requirements that are essential to the instruction being pursued or directly related to a licensing requirement, (b) lower academic standards, or (c) substantially alter the course or program (i.e., fundamentally alter the nature of the course or program). Academic Accommodations that present a fundamental alteration or undue burden are rare, and these defenses may only be used to deny an accommodation after careful consideration by relevant University officials.

About This Form

Faculty must use this form when they have a question or concern about how an approved academic accommodation may affect an essential course requirement, learning objective, competency, or academic standard.

Submitting this form does not change or suspend the student's approved accommodation. Faculty must continue to implement the accommodation unless otherwise directed by the Office for Students with Disabilities.

1. Faculty Information

Faculty Name:

Department/Program:

Course Number and Title:

Quarter/Term:

Email:

Office for Students with Disabilities

University of California San Diego, Pepper Canyon Hall, Suite 300, 9500 Gilman Drive, La Jolla, CA 92093
P (858) 534-4382 · F (858) 534-4650 · osd@ucsd.edu

2. Which approved accommodations are you concerned about?

How does the accommodation(s) substantially affect your course or course activities?

3. What academic requirement is altered and how?

Please identify the specific course requirement, learning objective, competency, skill, or academic standard that you believe may be affected. Provide as much detail as possible.

Where is the affected requirement documented?

- ☐ Course syllabus
- ☐ Program requirement
- ☐ Technical standard
- ☐ Accreditation or licensing requirement
- ☐ Department or school requirement
- ☐ Other _____

4. Describe Your Concern

Please explain why you believe the accommodation may substantially affect the student's ability to meet the academic requirement identified above.

Please focus on the academic requirement and provide specific examples from the course or program.

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What would the student be unable to demonstrate, with the accommodation implemented as approved?

5. Alternatives

Have you considered another way the student could meet the same academic requirement or learning objective?

☐ Yes

☐ No

☐ I am unsure

If yes, please describe the alternative you have considered:

If you are unsure, please describe what you think may be possible or where you need assistance:

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6. Additional Information

Is there anything else that would help the University understand your concern?"

Are there course materials, assignments, assessments, policies, technical standards, or other documents that would help inform the review?

- ☐ Yes
☒ No

Please include relevant materials in your email submission of this form.

7. Faculty Confirmation

By submitting this form, I am requesting consultation regarding an approved academic accommodation. I understand that this request does not constitute a denial or modification of the student's accommodation.

I understand that the University will review the academic concern and, as appropriate, engage in a reasoned deliberation regarding the accommodation and any available alternatives."

Faculty Signature:

Date:

Please save a copy of this form and submit via email to jboval@ucsd.edu. Be sure to include relevant documentation.

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