

## REQUEST for ACCOMMODATION in WRITING NBT

Surname

First name

SA ID Number

Country of Citizenship if not South African

Passport Number (If not SA citizen,)

<b>Parent/Guardian Telephone/Cell</b>
<b>Applicant TelephoneNumber (Cell)</b>

<b>Requested Test Site</b>	
<b>Requested Test Date</b>	
<b>Institution(s) where you are applying</b>	

**ACCOMMODATION REQUESTED:**

AQL only  AQL and Maths  ENG  AFR

<b>Disability on which request is based</b>	
<b>Blind</b>	
Can you read Braille?	<input type="checkbox"/>
Other Requirements:	<input style="width: 100%;" type="text"/>
<b>Visually Impaired</b>	
Do you require an enlarged question paper? (Max font size 42)	<input type="checkbox"/>
Other requirements:	<input style="width: 100%;" type="text"/>
<b>ADHD/ADD?</b>	
<b>HEARING IMPAIRMENT</b>	
Other requirements:	<input style="width: 100%;" type="text"/>
<b>Mobility/Physically Impaired</b>	
Are any special furniture accommodations required?	<input type="checkbox"/>
Other requirements:	<input style="width: 100%;" type="text"/>
<b>Learning Disability</b>	
Dyslexia	
Do you require extra time?	<input type="checkbox"/>
How much extra time is required?	<input style="width: 100%;" type="text"/>
Do you require a Scribe? <input type="checkbox"/>	Do you require a Reader? <input type="checkbox"/>
<p><b>Surname:</b> _____ <b>First Name:</b> _____</p> <p><b>E-Mail:</b> _____</p> <p><b>Signature:</b> _____ <b>Date:</b> _____</p>	

**Submit by e-mail with supporting medical documents to: [juandre.alard@uct.ac.za](mailto:juandre.alard@uct.ac.za).**