## **POLICY ON STUDENTS WITH SPECIAL NEEDS**

It is the intention of Atlantis College to give all applicants who desire to study at the college the opportunity to acquire a quality education regardless of sex, gender, race, nationality, religion, age, disability and sexual orientation.

We sincerely encourage applicants with disabilities to enrol and participate in student life, provided that they are capable of carrying out and completing the course of their choice. Atlantis College is always open to suggestions and recommendations that will improve services concerning students with disabilities.

A student with special needs is a student who is in one of the following conditions:

- a) Physical impairment (visual impairment, hearing impairment, physical movement muscular impairment, epilepsy, diabetes, etc.).
- b) Learning disability (e.g. dyslexia and other similar conditions).
- c) Psychological condition (extreme stress, serious anxiety, depression and other similar problems of a personal or family nature).

Unless a condition is obvious a student must provide a specialist report that verifies its existence.

The College acknowledges its proactive duty to serve the educational needs of such students by doing its utmost to secure the necessary means, facilities and personnel.

Such measures may include:

- a) Physical access to buildings and facilities.
- b) Psychological/personal counselling services.
- c) Alternative assessment methods (e.g. more time allowed, oral examinations, leniency for spelling mistakes, simpler tests, etc.).
- d) Other measures as and when they are professionally prescribed (e.g. electronic notes and texts, braille, individual tutoring if necessary, etc.).

## Measures to Facilitate Students with Special Needs:

S/N	CONDITION	FACILITATING MEASURES
1.	Severe Visual Impairment	<ol> <li>Use of recorder</li> <li>Oral exam</li> <li>More time allowed for exam</li> <li>Electronic notes, texts and brail</li> <li>Individual tutoring if necessary</li> </ol>
2.	Severe Hearing Impairment	<ol> <li>More time allowed for exam</li> <li>Simpler tests</li> <li>Leniency for spelling mistakes</li> <li>Individual tutoring if necessary</li> </ol>
3.	Muscular Dystrophy	<ol> <li>More time for exam</li> <li>The exam may be taken individually</li> <li>Notes in electronic form</li> </ol>
4.	Diabetes (Hypoglycaemia)	More time allowed for exam, if needed

5.	Dyslexia	<ol> <li>Oral exam, if necessary and feasible</li> <li>Leniency for spelling mistakes</li> <li>More time allowed for exam</li> <li>Individual tutoring if necessary</li> </ol>
6.	Disability	<ol> <li>More time allowed for exam</li> <li>Extra notes if necessary</li> </ol>
7.	Epilepsy	More time allowed for exam, if necessary (cases of crises) & seizures

## Notes:

- 1) The facilitating measures for each person are determined by an appropriate Specialist.
- 2) All faculty members and other administrative staff members involved should be informed of the above measures and general policy.

## **GENERAL ACADEMIC SUPPORT**

Atlantis College requires that all students provide the College with all recent necessary documents and evaluations (diagnosis, Doctors report etc). The students' needs will be assessed continuously and recommendations for their support will be discussed in order to fit their specific needs.

The necessary recommendations guided by the suggestion of experts, concerning each individual's unique case will be made available to faculty or other college staff where necessary.

Students are requested to provide the College with official documentation regarding the disability. All data collected are confidential and will be kept secured in accordance with Cyprus Law.

Faculty members are encouraged to meet with the students and discuss possible adjustments that need to be made to ensure that they are suitable to the specific needs of each individual.

The Counselling service will also be more than willing to offer their support.

# PROCEDURES FOR STUDENTS WITH SUSPECTED LEARNING DISABILITIES

It is possible for a student with a learning disability to go undiagnosed. In this case, the staff or faculty member suspecting that there is a problem should complete the form reporting the suspected disability and they should contact the counselling service for help and advice.

# **STUDENT'S HEALTH HISTORY FORM**

Please take a moment to answer a few questions about your health. It is importate that we know of any medical condition or disability which may require speciarrangements prior to your starting the College as a student. The information the you submit will be maintained by the College in the <b>STRICTEST CONFIDENCE</b> as will provide the basic data essential for your care.	ial at
IF YOU CHOOSE NOT TO COMPLETE THIS FORM PLEASE SIGN BELOW	
I,(full name) do not wish to complethis form. I understand that by not completing this form the Atlantis College is n responsible if appropriate emergency care, pertinent to my medical condition is n provided if such situation arises.	ot
Student Signature:	
Date:	
Surname:Name:	
Programme of studyGender: Female/Male	
Date of Birth: Place of Birth:	
Home Address:	
Father's Name:Tel No.:	
Profession:	
Mother's Name:	
Profession:	
Contact person in case of Emergency	
Tel No.:	
Relation	

Do you suffer from any health problems? If yes, please give exact name of illness, use of any medications etc
Do you have any mobility, visual, hearing or speech difficulties that the faculty teaching you should be aware of?. If yes please give details
Do you have any psychological /emotional issues or eating disorders that the first aiders and the faculty teaching you should be aware of? If yes, please write in detail
In case you have a health crisis while at Atlantis College, is there any medical information the first aiders and the faculty teaching you should be aware of? If yes, please give details

Doctor's name (if needed)Tel No.:
PERSONAL DATA DISCLAIMER
All data collected in this document is confidential and will be kept secured in accordance with the relevant Cyprus Law. Atlantis College respects the confidentiality of all personal data and aims at protecting them by making them non accessible to third parties. The personal data collected can only be used in case of an emergency to the benefit of the student.
REPORTING SUSPECTED STUDENTS WITH SPECIAL EDUCATIONAL NEEDS
<u>FORM</u>
Name of Staff / Faculty member
Department/Course
Tel No.:
Name of student with suspected disability
Student ID Number
Tel No.:
Learning Disability √
(the way in which a person takes in, remembers, understands and expresses information e.g dyslexia, ADD etc).
Physical Disability √
(when a person has a physical impairment, which has a substantial long-term effect on their ability to carry out day to day activities e.g. hearing impairment, serious eyesight problem etc).
Briefly outline the rationale for suspecting a form of disability

Please submit this form to the Office of Academic Affairs			
Signature Date			
FOR INTERNAL USE			
Action taken			