



If you fill out this form, the person in charge of adapted services at your campus will be able to welcome you and evaluate your needs with the most information possible. Do not forget that for us to be able to open a file for you, you must have in hand written medical proof or a report from a specialist confirming your diagnosis. The person in charge will contact you via MIO to schedule an appointment.

IDENTIFICATION

Name and first name		Permanent code
Admission application number	Program of study	

DIAGNOSIS (ES)

Indicate your diagnosis or diagnoses and the category of the professional who made each diagnosis (doctor, speech therapist, neuropsychologist, psychologist, etc.). Attach the reports you have in hand to this form.

Diagnosis	Professional

EARLIER INTERVENTIONS AND PERSONAL PERCEPTIONS

Select the elements that apply to you.

→ Services received at primary and/or secondary school <input type="checkbox"/>	→ Use of a laptop <input type="checkbox"/>	→ Use of an electronic dictionary <input type="checkbox"/>
→ Annual intervention plans <input type="checkbox"/>	→ Use of WordQ <input type="checkbox"/>	→ Interpreter's assistance <input type="checkbox"/>
→ Extra time <input type="checkbox"/>	→ Use of Antidote <input type="checkbox"/>	→ Adapted courses <input type="checkbox"/>
→ Adapted schedule <input type="checkbox"/>	→ Special adapted material <input type="checkbox"/>	
→ Other (s):	→ Educational support (remedial teaching, special education, etc.) <input type="checkbox"/>	

What are your greatest strengths: _____

What are your greatest challenges: _____

SIGNATURES

Student

Date

Adapted services worker

Date