Guidelines for Disabilities
Requiring Psycho-educational evaluation

((Including but not limited to: Learning Disabilities, ADHD, Asperger’s Disorder/ Autism Spectrum Disorders, etc.)

These guidelines are provided in the interest of assuring that LD documentation is appropriate to verify eligibility and to support requests for accommodations, academic adjustments and/or auxiliary aids. They are consistent with current national standards for post secondary education.

It is the student's responsibility to provide documentation to this office. Students are encouraged to identify themselves to the office, but are not required to do so. If a student chooses not to reveal a disability, Services for Students With Disabilities cannot provide services or accommodations to the student.

I. Qualifications of the Evaluator

Professionals conducting assessments, rendering diagnoses of learning disabilities, and making recommendations for appropriate accommodations must be qualified to do so. The following professionals would generally be considered qualified to evaluate specific learning disabilities provided that they have additional training and experience in the assessment of learning problems in adolescents and adults: clinical or educational psychologists, school psychologists, neuropsychologists, learning disabilities specialists, medical doctors, and other professionals. Use of diagnostic terminology indicating a learning disability by someone whose training and experience are not in these fields is not acceptable. All reports should be on letterhead, typed, dated, signed and otherwise legible. It is not considered appropriate for professionals to evaluate members' of their families.

II. Documentation should contain the following:

A. Diagnostic Interview

An evaluation should include the summary of a diagnostic interview. It may include: A description of the presenting problems; developmental, medical, psycho-social and employment histories; family history and a discussion of co-morbid conditions where indicated.

Assessment

The evaluation must provide clear and specific evidence that a disability does or does not exist. Assessment and diagnosis should be based on a comprehensive assessment battery which does not rely on any one test or subtest. A substantial limitation to learning or other major life activity must be provided. Tests should be reliable, valid and standardized for use with as adolescent/adult population. A list of commonly used tests is included in the Appendix. The following domains must be addressed:

1. Aptitude. A complete intellectual assessment with subtest and standard scores reported.

2. Academic Achievement. A comprehensive academic achievement battery is necessary with all subtests and standard scores reported for those subtests administered. The

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battery should include current levels of academic functioning in reading (decoding and comprehension), mathematics, and oral and written language.

3. Information Processing. Specific areas of information processing (e.g., short- and long-term memory, sequential memory, auditory and visual perception/processing, processing speed, executive functioning and motor ability) should be assessed.

4. Other. Other standard and formal assessment measures may be integrated with the above to help support a diagnosis. Testing must be current, preferably within the last three (3) years. An Individual Educational Plan (IEP) alone is not acceptable documentation. Reports must include the date(s) of testing.

B. Specific Diagnosis

There must be clear and specific evidence of a disability. Individual "learning styles," "learning differences," "academic problems" and "test difficulty or anxiety," in and of themselves, do not constitute a learning disability. The diagnostician should use direct language and avoid terms such as, "suggests" or "is indicative of." If the data indicate that a learning disability is not present, the evaluator should state that conclusion in the report.

C. Test Scores

Standard and/or Percentile scores should be provided for all normed measures. Grade equivalents are not useful unless standard and percentiles are included. The profile of the student's strengths and weaknesses should logically relate to accommodation requests.

D. Clinical Summary

A clinical summary should be included with the following information:

1. Demonstration of the evaluator's having ruled out alternative explanations for academic problems.

2. Indication of how patterns of the student's ability, achievement and processing show the presence of a learning disability.

3. Indication of the substantial limitation to learning or other major life activity presented by the learning disability and the degree to which it impacts the individual.

4. Indication of why specific accommodations are needed and how the effects of the specific disability are accommodated. A record of prior accommodation or auxiliary aids should be provided if available.

III. Recommendations for Accommodations

The diagnostic report should include specific recommendations for accommodations as well as

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an explanation as to why each accommodation is recommended. Recommendations should be supported with specific test results or clinical observations.

If accommodations are not clearly identified in the report, Services for Students With Disabilities will seek clarification or more information.

Services for Students With Disabilities will make the final determination for providing appropriate and reasonable accommodations.

Appendix

Tests for Assessing Adolescents and Adults

Test instruments should be reliable, valid, and standardized on an appropriate norm group.

Aptitude

• Wechsler Adult Intelligence Scale-IV (WAIS-IV)
• Woodcock-Johnson Psychoeducational Battery-Revised: Test of Cognitive Ability
• Kaufman Adolescent and Adult Intelligence Test (KAIT)
• Stanford-Binet Intelligence Scale (4th ed.)

The Slosson Intelligence Test-Revised and the Kaufman Brief Intelligence Test are primarily screening devises which are not comprehensive enough to provide the kind of information necessary to make accommodation decisions.

Academic Achievement

• Scholastic Abilities Test for Adults (SATA)
• Stanford Test of Academic Skills
• Woodcock-Johnson Psychoeducational Battery-Revised: Test of Achievement
• Wechsler Individual Achievement Test (WIAT)

Or specific achievement tests such as:

• Nelson-Denny Reading Skills Test
• Stanford Diagnostic Mathematics Test
• Test of Written Language-3 (TOWL-3)
• Woodcock Reading Mastery Tests-Revised

Specific achievement tests are useful instruments when administered under standardized conditions and interpreted within the context of other diagnostic information. The Wide Range Achievement Test-4 (WRAT-4) is not a comprehensive measure of achievement and is not useful as the sole measure of achievement.

Information Processing Acceptable instructions include the Detroit Tests of Learning Aptitude-3 (DTLA-3), the Detroit Tests of Learning Aptitude-Adult (DTLA-A), information from subtests on WAIS-IV, Woodcock-Johnson Psychoeducational Battery-Revised: Test of Cognitive Ability, as well as other relevant instruments.