



APPLICATION FOR OBTAINING THE STATUS OF A STUDENT WITH SPECIAL NEEDS

Name and Surname:					
Enrolment number:					
Date and place of birth:					
Contact address:					
UP Faculty:					
Study programme:					
Year of study:					
Full time / Part time:	Full time			Part time	
Type of study programme:	Undergraduate Professional	Undergraduate academic	Integrated master	Master	PhD
Contact (Telephone number or e-mail):					

I would like to obtain the status of a student with special needs because of (please describe the difficulty, barrier or disability and how it affects your studies):

For a more equal inclusion in the study process, I request the following adjustments: [to be adjusted by the faculty in accordance with its internal rules (examples are given)]

Reductions and adjustments to compulsory attendance and excused absences for study obligations **		YES/NO	Note*
Reduced attendance, partial home tutoring, to the extent feasible or permissible to achieve learning outcomes.			
Adjusted deadlines and methods for completing study requirements **		YES/NO	Note*
1	Presence of an assistant - reader, note-taker.		
2	Presence of an interpreter for Slovenian Sign Language.		
3	Alternative ways of delivery of written products.		
4	Receipt in advance of study materials used in lectures and tutorials, if they cannot be obtained on site in a form accessible to the student.		
5	Recording of lectures and tutorials for personal use with the permission of, or prior arrangement with, the lecture provider.		
6	Adaptation of practical exercises and study literature.		
7	Other (complete as appropriate)		
Adjustments to the assessment and knowledge checking		YES/NO	Note*
1	Examinations outside the timetable, in agreement with the lecture provider.		
2	Taking written examination in oral form.		
3	Taking oral examination in written form.		
4	Adaptation of the format of the examination materials.		
5	Extended exam time.		
6	Use of special equipment (such as magnifiers, electronic magnifiers, special pens, etc.).		
7	Taking written examinations using a computer or other suitable and accessible device.		
8	Taking written examinations with the assistance of a note-taker.		
9	Taking examination with the assistance of a reader.		
10	Taking examination with the assistance of a sign language interpreter.		
11	Taking examination in a special room.		
12	Adaptations to the space or room and adaptations to the equipment.		
13	Shorter breaks during exams.		

14	Reasonably longer deadlines for the submission of papers and other study requirements.		
15	The possibility of undertaking certain study requirements as a pair with a student without special needs.		
16	Possibility of special examination dates.		
17	Other reasonable adjustments necessary for the assessment of the student with special needs.		
Accessibility of materials or study literature		YES/NO	Note*
1	Longer borrowing time.		
2	The possibility of borrowing material that is only available in the reading room (conversion of material into accessible forms).		
3	Providing assistance in finding material.		
4	The possibility of borrowing materials from the (student's) assistant, if the library is inaccessible to the student.		
5	Other (complete as appropriate)		

* In the notes, the student can indicate the different options: e.g. whether they need these adjustments only occasionally or permanently, and add a short description of the adjustment if necessary.

** By agreement with the lecture provider.

I attach the following relevant and mandatory supporting documents to my application:

- Decision on guidance from the Institute of Education of the Republic of Slovenia from the last completed level of education.
- Expert opinion of the Commission for Guidance of Children with Special Needs
- Decision of the Pension and Disability Insurance Institute of Slovenia
- Medical certificate from a specialist doctor
- Other:

The date of the decision or medical certificate: _____

Have you been granted special status in the past because of a special need, disability or illness?

- Yes
- No
- Other:

If you have been granted special status in the past, please sign or write down who or which institution granted it to you.

- Institute of Education of the Republic of Slovenia
- Pension and Disability Insurance Institute of Slovenia
- Specialist doctor
- Other:

The date of the decision or medical certificate: _____

Other relevant notes or information for the Commission:

Place _____, date _____

Student's signature:
