University Learning Disabilities Board

REQUEST FOR RECOGNITION OF LEARNING DISABILITY

Please attach the referral form: Payment voucher for evaluation, grade sheet, previous evaluations and certificates

	Date of filing the application			
Surname				
First Name				
ID No				
Date of birth Date	e of immigration Co	ountry of origin		
Telephone Cell phone				
Address				
Faculty				
Department				
Academic year Please circle wh	nichever is appropriate: 1st, 2nd, 3rd	, 4 th		
Degree: Bachelor's Master's				
Matriculation grade				
Psychometric grade Pl	lease specify: Verbal grade	_ Quantitative grade		
English grade				
Were you diagnosed in the past wit	th a learning difficulty?			
Attach copy of the evaluation repo	rt.			
Did you have approval to receive ex	xtra time in high school?	_		
Did you receive approval for extra t	time for your psychometric exam?			
If so, attach the certificate of appro	oval.			
Did you have approval for extra tim	ne from the university/college/ pre	paratory course?		
If so, attach the certificate of appro	oval.			
Have you completed your English la	anguage requirements as a foreign	language?		

Reason for referral					
What difficulties do you you encounter in your studies?					
Circle your main areas of difficulty:					
Slowness, spelling mistakes, illegible handwriting, listen to the lecturer and take notes at the same					
time, reading comprehension, ability to complete exams on time, test anxiety, memory,					
organization of learning material, concentration, attentiveness, casual errors, concise writing,					
comprehension of the study material, simple calculations, drawing, English Other					
When did you become aware of your problem?					
Have you had any academic difficulties in the past? Specify					
Did you have problems acquiring reading skills in elementary school?					
Did you have problems acquiring writing skills in elementary school?					
Did you have concentration or attentiveness difficulties?					
How were they expressed?					
At what age did you begin to learn English?					
Did you have difficulties learning English?					
Did you receive extra help in elementary school/high school?					
Since when?					
What type of extra help did you receive?					
In which major/type of matriculation did you study?					
How many times did you take the psychometric exam? Specify your grades:					

With which hand do you write?	
Is your handwriting legible today?	
Do you make spelling mistakes?	
Do you have enough time to copy from the bla	ackboard or take notes?
Why did you choose your current academic m	najor?
Does your adjustment to the university satisfy	you?
Scholastically	
Socially	
Do learning disabilities run in your family?	
What are your parents' occupations and educa	ation?
What language is spoken at home?	
Do you have any medical problem?	
Since when?	
Explain:	
What treatment do you get for your problem?	
Did you serve in the IDF?	What was your position?
Specify your requests from the University Lear	rning Disabilities Board
	Student's signature

Waiver of Confidentiality

I, the undersigned, consent t	that the evaluation results (evaluation report) to be transferred at the
institute	will be transferred directly to BGU for further treatment and
recommendations.	
Date	Signature

Please check the degree to which the sentence reflects your problem:

		Always	Frequently	Sometimes	Infrequently	Never
1.	It is difficult for me to study for long periods of time.					
2.	It is difficult for me to listen to the lecturer for long periods of time.					
3.	·					
4.						
5.	It is difficult for me to get organized with the amount of assignments and obligations I have.					
6.	When the studies require me to make an effort, I switch to something else.					
7.	Things required for learning tend to disappear.					
8.	Every little noise upsets my concentration when studying.					
9.	It is difficult for me to sit in one place for long.					
10.	I always have a sense of unrest.					
11.	I am restless.					
12.	I feel the need for intense physical activity.					
13.	During lectures, I blurt out the answer before the end of the question.					
14.	It is difficult for me to wait my turn patiently.					
15.	In conversations, I cut in when the other person is speaking.					
16.	I often look at others in class instead of concentrating.					
17.	During exams, I pay attention to everything happening around me.					
18.	In a conversation or activity, I jump from one subject to the next.					
19.	When I get into a subject or activity, it is difficult to stop me.					
20.	It is difficult for me to listen to the lecturer and take notes at the same time.					
Tot	al					