



Disability Support Services

Alternative Media Request

A separate request must be made for each book. **Receipts are required.** You can scan and email your receipts or bring them to the DSS office in W207.

Please Note: Requests for Alternative Media can take up to 6 weeks. If you have questions about this form or need help filling it out, please contact the DSS Office at (425) 739-8300 or email at dssinfo@lwtech.edu

STUDENT INFORMATION

Name _____

Date of Request _____

Student ID _____ Email _____

Quarter & Year _____ Phone _____

BOOK INFORMATION

BOOK #1: Title _____ Edition _____

Author _____ ISBN _____

Publisher _____

Date of Purchase _____ Store Name _____

Purchase Price _____ Course Name _____

Check here if additional books listed on the back of this page

REQUESTED FORMAT

Please choose one Braille Audio Digital (.pdf or .doc)

Large Print
Font Style and Size _____

Other _____

COMMENTS

I will not distribute to anyone else, nor allow anyone else to copy, reproduce, any alternative media provided by Disability Support Services. I understand that improper use of copyrighted materials is illegal.

Student Signature

Date

DSS Representative

Date

BOOK #2:

Title _____ Edition _____
Author _____ ISBN _____
Publisher _____
Date of Purchase _____ Store Name _____
Purchase Price _____ Course Name _____

BOOK #3:

Title _____ Edition _____
Author _____ ISBN _____
Publisher _____
Date of Purchase _____ Store Name _____
Purchase Price _____ Course Name _____

BOOK #4:

Title _____ Edition _____
Author _____ ISBN _____
Publisher _____
Date of Purchase _____ Store Name _____
Purchase Price _____ Course Name _____

BOOK #5:

Title _____ Edition _____
Author _____ ISBN _____
Publisher _____
Date of Purchase _____ Store Name _____
Purchase Price _____ Course Name _____

BOOK #6:

Title _____ Edition _____
Author _____ ISBN _____
Publisher _____
Date of Purchase _____ Store Name _____
Purchase Price _____ Course Name _____
