

Alternative Text Format Request Process

The Office of Disability Services provides textbooks and other materials in alternative formats as an accommodation for all eligible students who possess a print or print-based disability. Textbook/print conversion is a time-intensive process and can require several weeks or months to complete. To ensure availability of alternative text by the first class day, students are encouraged to register early and submit an Alternative Text Format Request Form to The Office of Disability Services in advance. The Office of Disability Services cannot guarantee timely accommodations for late requests, but will make every effort to accommodate those who come in a timely manner.

Students who are interested in having a textbook in alternative format must:

1. Provide proof of purchase of each textbook that they are requesting.
2. Request materials at least 4 to 6 weeks prior to the first class day. Requesting materials on the first class day or later in the semester can delay the actual receipt of materials from publisher.
3. **Depending on the format requested, materials can take 4 to 12 weeks.**
4. **Be enrolled in courses for the semester that they are requesting alternative formats for.**
5. **Provide a copy of their course schedule and syllabus for each course that they are requesting in alternative format.**

Students who are receiving Alternative text as an accommodation are prohibited from revising, converting, disassembling, modifying, selling, licensing, renting, loaning, or otherwise sharing any document that is being converted for them by the Office of Disability Services. A violation of any or all of the stated above, may result in the termination of alternate formatting privileges.

Alternative Text Format Request Form

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|---|--|
| Semester Attending: _____ Date: _____ | |
| CBC Location (Please Check One): _____ Alice _____ Beeville _____ Kingsville _____ Pleasanton | |
| Name: _____ CBC ID# _____ | |
| Phone: _____ Email: _____ | |
| Preferred Format: <input type="checkbox"/> DOC <input type="checkbox"/> PDF <input type="checkbox"/> TXT <input type="checkbox"/> XML <input type="checkbox"/> MathML <input type="checkbox"/> Braille <input type="checkbox"/> Other _____ | |
| Disability Services does not guarantee that the publisher will provide your document in your preferred format. | |

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|----------------------|------------------------|--------------------|
| Course Title: | Section: | Instructor: |
| Book Title: | Copyright Date: | Edition: |
| Author(s): | Publisher: | ISBN: |

FOR OFFICE USE ONLY:

| | |
|--|--|
| Date of Book Drop Off: | Date of Request to Publisher: |
| Book Received: | Date File received from Publisher |
| Date receipt turned in to Disability Services | |

As a student with a print/ print-based disability, I request that the Office of Disability Services convert the title listed above, which is accessible to me and for my personal educational use only. I certify that I have purchased this book in print and understand that the information I provide on this document may be submitted to the book publisher or the publisher's distributor.

Student Signature: _____ Date: _____