



## **Specific Guidelines for Documentation of a Learning Disability in Adolescents and Adults**

The following documentation requirements are provided in the interest of assuring that learning disability (LD) documentation is appropriate to verify eligibility and to support requests for accommodations, academic adjustments, and/or auxiliary aids.

### **Documentation Requirements**

#### **I. A qualified professional must conduct the evaluation**

Comprehensive training and relevant work experience with an adolescent and adult LD population are essential in rendering a diagnosis of specific learning disabilities and making recommendations for accommodations. The following professionals would generally be considered qualified to evaluate specific learning disabilities: clinical or educational psychologists; school psychologists; neuropsychologists; learning disability specialists; medical doctors with training and experience in the assessment of learning disabilities in adolescents and adults. The professional must be an impartial individual who is not a family member of the student.

The name, title and professional credentials of the evaluator, including information about license or certification (e.g., licensed psychologist) as well as the area of specialization, employment, and state in which the individual practices must be clearly stated on the document. All reports should be on letterhead, typed, dated, and signed.

#### **II. Documentation must be current**

Testing should have been conducted within four years of the student's enrollment at Saint Anselm College.

#### **III. Documentation must be comprehensive**

Documentation must validate the need for services based on the student's current level of functioning in the educational setting. A school plan such as an individualized education program (IEP) or a 504 plan is not sufficient documentation in and of itself. A comprehensive assessment battery and the resulting diagnostic report must include a diagnostic interview, assessment of aptitude, measure of academic achievement and information processing, a specific diagnosis, and actual test scores from standardized instruments.

##### **A. Diagnostic interview**

An evaluation report should include the summary of a comprehensive diagnostic interview by a qualified evaluator. The diagnostician must provide a summary that includes a description of the presenting problem(s); developmental, medical, and psychosocial histories; family history (including primary language of the home and the student's current level of English fluency); and a discussion of dual diagnosis.

##### **B. Assessment**

The neuropsychological or psychoeducational evaluation for the diagnosis of a specific learning disability must provide clear and specific evidence that a learning disability does or does not exist. Minimally, the domains to be addressed must include the following:

1. **Assessment of Aptitude/Cognitive Ability.** A complete intellectual assessment with all subtests and standard scores reported.
2. **Assessment of Academic Achievement.** A comprehensive academic achievement battery is required with all subtests and standard scores reported for those subtests administered. Must include current levels of academic functioning in relevant areas (reading, mathematics, oral and written language).

3. Assessment of Information Processing. Specific areas of information processing (short- and long-term memory, sequential memory, auditory and visual perception/processing, processing speed, executive functioning and motor ability) should be addressed.
- C. Specific diagnosis  
Non-specific diagnoses such as individual “learning styles,” “learning differences,” “academic problems,” “slow reader,” “test difficulty or anxiety,” in and of themselves do not constitute a learning disability. The diagnostician must state explicitly the diagnoses and documentation of a learning disability and avoid the use of terms such as “suggests” or “is indicative of.”
- D. Actual test scores from standardized instruments must be provided  
Standard scores and/or percentiles must be provided for all normed measures. Grade equivalents must be accompanied with standard scores and/or percentiles. The data must logically reflect a substantial limitation to learning for which the candidate is requesting the accommodation. The particular profile of the student’s strengths and weaknesses must be shown to relate to functional limitations that may necessitate accommodations.

#### IV. Rationale

The diagnostic report must include specific recommendations for accommodation(s) as well as a detailed explanation of why each accommodation is recommended. The evaluator must describe the impact the diagnosed learning disability has on a specific major life activity as well as the degree of significance of this impact on the student.

#### V. Interpretive Summary

- A. A clinical summary must include:
- Indication that the evaluator ruled out alternative explanations for academic problems such as poor education, poor motivation and/or study skills, emotional problems, attentional problems, or cultural/language differences
  - Indication of how patterns in cognitive ability, achievement, and information processing are used to determine the presence of a learning disability
  - Indication of the substantial limitation to learning presented by the learning disability and the degree to which it affects the student in the educational environment for which the accommodations are being requested
  - Indication of why specific accommodations are needed and how the effects of the specific disability are mediated by the accommodations.

Please note: If the director of Academic Advisement deems the documentation to be inadequate in scope or content, a reevaluation may be required before accommodations will be provided.

*Adapted from Association on Higher Education And Disability (AHEAD) Ad Hoc Committee on Learning Disabilities (1997)*

#### **AHEAD Ad Hoc Committee on Learning Disabilities**

Loring Brinckerhoff

Ad Hoc Committee Chairperson  
Educational Testing Service

Joan McGuire  
Ad Hoc Committee Liaison to the Board  
University of Connecticut, Storrs

Kim Dempsey  
Law School Admission Council

Cyndi Jordan  
University of Tennessee, Memphis

Shelby Keiser  
National Board of Medical Examiners

Catherine Nelson  
Educational Testing Service

Nancy Pompian  
Dartmouth College

Louise Russell  
Harvard University