

**EXAMINATION ADMINISTRATION****Form A: Candidate Request for Licensing Examination Accommodation (Form A)**

Candidates may request accommodation for a licensing examination based on a ground listed in the *Human Rights Code*, R.S.O. 1990, c. H.19. If you wish to make a request, it is important that you review the [accommodations](#) webpage carefully.

1. Before submitting a request for accommodation, candidates must read all of the information on the accommodations page under the heading [Lawyer and Paralegal Examinations](#).
2. In addition, candidates must read the information at [Policy and Procedures for Accommodations for Candidates in the Lawyer and Paralegal Licensing Processes](#).
3. Candidates must comply with the submission requirements set out at those links or their request may not be reviewed.
4. Candidates must comply with the posted deadlines for accommodation requests; failure to comply with the posted deadlines may result in the candidate having to defer their licensing examination to a future sitting.

**Common Reasons Why Documentation Is Deemed Insufficient**

- Evidence of the disability is not from a regulated health care professional licensed to diagnose the disability for which accommodation is being sought.
- Form B fails to provide a reasonable explanation or rationale based on history and objective evidence for why the candidate needs examination accommodations.
- The documentation is not legible.
- If extra time is requested, the specific amount of extra time is not indicated and/or the recommendation for extra time is not based on objective criteria.
- The recommendation for accommodation in Form B is entirely based on candidate self-reporting.
- The documentation does not address the current impact of the functional limitation on the specific testing activity.

Should you have registered and completed your financial arrangements with the Law Society for the examination, but your request for accommodation is incomplete, is insufficient, or is not received by the posted deadline, you will remain registered to sit the examination under standard conditions.

**The Law Society reserves the right to make the final judgment regarding examination accommodations.**

## Personal Information

Candidate Name:

Candidate Number:

Mailing Address:

Telephone:

Can detailed messages be left?

Yes

No

Email:

### 1. Description of Grounds for Accommodation

In this section, please identify the ground(s) upon which you are seeking accommodation. Select all of the following boxes that apply:

Disability due to a Cognitive and/or Psychological Condition

Disability due to a Physical and/or Medical Condition

Pregnancy- or Maternity-Related Need

Temporary Physical Impairment or Condition

Creed (including Religious Observance)

Family Status

Other:

Please include any additional details related to the selected ground(s) in the space provided. You must provide sufficient information to confirm the existence of a need for accommodation and the type(s) of accommodation requested. NOTE: The Law Society uses the information solely for the purpose of addressing the accommodation request for the licensing examination(s) and reasonably related purposes.

If you are requesting accommodation related to a disability, an illness, an injury, a medical condition, or a pregnancy- or maternity-related need, you will be required to provide medical information reasonably necessary to the provision of an accommodation. You may voluntarily provide more detailed information about your situation, including a specific diagnosis, if you feel comfortable doing so.

## 2. Description of Accommodation Requested

In this section, please describe any specific accommodation(s) you are requesting. Be as specific as possible. For example, if you are requesting licensing examination materials in an alternative format, specify the type of alternative format requested. If you are requesting any adaptive technology/software or other physical resources, specify the resources requested. If you are requesting additional writing time to complete a licensing examination, indicate the amount of additional time you are requesting.

## 3. Requirements for Supporting Documentation

If you are requesting accommodation related to a disability, an illness, an injury, a medical condition, or a pregnancy- or maternity-related need, you are required to provide, in support of this request, a completed Form B: Health care professional recommendation for licensing examination accommodation ("Form B").

If you are requesting additional writing time to complete a licensing examination due to a cognitive condition, a psychological or psycho-educational assessment report is required. A psychological and/or psycho-educational assessment report should identify issues impacting the candidate's development, functioning, severity of condition, and current treatment. This report should explain how the candidate is impacted by the disability and how the candidate's functional limitations are caused by the diagnosed impairment, in order to provide a measurable basis to justify the recommendation for additional writing time. All recommendations for additional writing time must indicate exactly how much additional writing time is requested and must relate to the multiple-choice format of the licensing examinations.

If you wish, you may also provide the following types of supporting documentation:

- A recent letter from your law school, paralegal college or the National Committee on Accreditation (NCA) listing all accommodations received, if accommodations were provided;
- A letter from the Law School Admission Council (LSAC), if accommodations were provided for the LSAT.

**Please Note:** Proof of prior accommodation is not a guarantee that the same accommodation will be provided to write the licensing examination(s), as all requests are assessed on a case-by-case basis with reference to the specific conditions and requirements of the licensing examinations. However, information regarding any prior accommodation you have received for a similar disability from another organization or institution may assist Examination Administration in determining the most appropriate accommodation.

#### 4. Consent

By signing below, the candidate referenced below (Candidate) hereby consents to the disclosure, transmittal, and examination of information provided in or with Form A and information in Candidate's file to those who may reasonably require information pertaining to Candidate's accommodation needs and accommodations provided in order to address Candidate's accommodation request for Candidate's licensing examination(s).

If Candidate has provided information from Candidate's law school, paralegal college, the LSAC or NCA, Candidate consents to the Law Society clarifying the information with the organization that provided it.

If applicable, Candidate consents to the completed Form B being sent directly by Candidate's health care professional to the Law Society. Candidate further consents to the Law Society contacting the medical professional who completed Form B, if necessary, to clarify any information provided in Form B.

This consent may be rescinded or amended in writing at any time, except where action has already been taken on the authority of consent.

#### 5. Candidate Confirmation and Signature

Candidate confirms that the foregoing is an accurate description of the circumstances giving rise to this request for accommodation. Moreover, Candidate understands that it is Candidate's duty to inform the Law Society of any changes in Candidate's accommodation needs. Candidate understands that the individuals receiving this information at the Law Society for purposes of the licensing examination(s) do not routinely provide the information to other departments at the Law Society; therefore, Candidate must disclose accommodation requirements to other departments as Candidate requires.

Candidate Signature:

Date:

**By typing Candidate's signature into the field above, Candidate agrees that Candidate is signing this form electronically and that Candidate's electronic signature is the legal equivalent of Candidate's manual signature on this form.**