



PRPC Special Exam Accommodations Request Form

H&W complies with the Americans with Disabilities Act and will work with its testing partners to provide reasonable accommodations for those who have disabilities and request accommodations. This form may be submitted by test applicants who require special accommodations at the testing center. For more information, please consult section 3.3 of the PRPC Informational Booklet.

Please be aware that special accommodation may incur additional fees, depending on the resources required at the testing location.

Test participants who have disabilities and would like to request accommodations may do so by completing the following:

- Submit request in writing a minimum of 45 days prior to scheduled testing date
- Submit appropriate documentation of disability (letter from physician)

At which testing center will you be taking the PRPC Examination?

To find the nearest Kryterion testing location to you, visit http://kryteriononline.com/host_locations/. Please pick your top 3 choices:

1st Preferred Date/Time

Facility/City/State:

Date: _____ Time: _____

2nd Preferred Date/Time

Facility/City/State:

Date: _____ Time: _____

3rd Preferred Date/Time

Facility/City/State:

Date: _____ Time: _____





What is the nature of your disability:

What accommodations are you requesting for this test (please choose all that apply):

- Client approved ADA Contractor
- Food/Water (describe specific items needed in the additional information section)
- Medical equipment (describe specific items needed in the additional information section)
- Multiple Breaks
- Private Room (The KTN Center may require an additional fee to reserve a private room)
- Reader
 - Reader & Recorder
- Recorder
- Screen Magnification software (Zoom Text)
- Screen Reader software (Zoomtext with Speech)
- Screen Reader software (JAWS)
- Attendance of Service Animal
- Sign Language Interpreter
- Translator
- Other (describe specific items and/or needs in the additional information section)

Additional Information in regard to your request:

What accommodations have been granted to you in previous, similar situations:

Print Name: _____

Date: _____

