

U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS
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FORM APPROVED
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**STUDENTS WITH DISABILITIES AT
POSTSECONDARY EDUCATION INSTITUTIONS**

Draft 10/30/09

POSTSECONDARY EDUCATION QUICK INFORMATION SYSTEM

This survey is authorized by law (P.L. 103-382). While participation in this survey is voluntary, your cooperation is critical to make the results of this survey comprehensive, accurate, and timely. Your answers may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose unless otherwise compelled by law. (Public Law 107-279, Education Sciences Reform Act, Section 183.)

Definition and Instructions

Disability: a physical or mental condition that causes functional limitations which substantially limit one or more major life activities, including mobility, communication (seeing, hearing, speaking), and learning.

The survey is designed to be completed by the person or office at your institution most knowledgeable about students with disabilities, and the services provided to these students by your institution. In most cases, this will be the disability support services office or coordinator. Please feel free to collaborate with colleagues at your institution who may be able to assist you in completing the survey.

IF ABOVE INSTITUTION INFORMATION IS INCORRECT, PLEASE UPDATE DIRECTLY ON LABEL.

Name of Person Completing This Form: _____

Title/Position: _____

Telephone Number: _____ Email: _____

Best days and times to reach you (in case of questions): _____

THANK YOU. PLEASE KEEP A COPY OF THE SURVEY FOR YOUR RECORDS.

PLEASE RETURN COMPLETED FORM TO:	IF YOU HAVE ANY QUESTIONS OR COMMENTS, CONTACT:
Mail: Kimberley Raue (8096.18.03) Westat 1600 Research Boulevard Rockville, Maryland 20850-3129	Kimberley Raue at Westat 800-937-8281, Ext. 3865 or 301-294-3865 Email:disabilitysurvey@westat.com
Fax: 800-254-0984	

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0733. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have any comments or concerns regarding the status of your individual submission of this form, write directly to: National Center for Education Statistics, 1990 K Street, NW, Washington, DC 20006.

Before you answer the questions, please carefully read the definition and instructions on the cover.

1. In 2008–09 (12-month academic year), were there any students enrolled at your institution who identified themselves to your institution as having a disability?

Yes..... 1 (Continue with question 2.) No..... 2 (Skip to question 8.)

2. What is the **total number** of students enrolled at your institution in 2008-09 (12-month academic year) who identified themselves to your institution as having a disability? _____

3. Which *one* of the following best describes the **total number** of students with disabilities that you provided in **question 2**? (Circle only one number.)

- Each student with a disability is counted only once in the total, regardless of the number of disabilities he or she has (i.e., an unduplicated count)..... 1
- Students with multiple disabilities are counted multiple times in the total (i.e., a duplicated count)..... 2
- Other (please describe): _____ 3

4. Please provide the number of students enrolled at your institution in 2008-09 (12-month academic year) who identified themselves to your institution as having a functional limitation, disability, or condition causing functional limitation. Please report the number of students using the categories listed below. Enter "0" if there were no students in a particular limitation, disability, or condition category.

- a. Difficulty hearing (i.e., deaf or hard of hearing)..... _____
- b. Difficulty seeing (i.e., blind or visual impairment that cannot be corrected by wearing glasses or contact lenses)..... _____
- c. Difficulty speaking or language impairment..... _____
- d. Mobility limitation/orthopedic impairment..... _____
- e. Traumatic Brain Injury..... _____
- f. Specific learning disabilities..... _____
- g. Attention Deficit Disorder or Attention Deficit Hyperactivity Disorder (ADD or ADHD)..... _____
- h. Autism Spectrum Disorders, including Asperger Syndrome..... _____
- i. Cognitive difficulties, intellectual disability, or mental retardation..... _____
- j. Health impairment/condition, including chronic conditions..... _____
- k. Depression, anxiety, or other mental illness/psychological or psychiatric condition, including Post Traumatic Stress Disorder (PTSD)..... _____
- l. Other (specify) _____ _____

5. Which *one* of the following best describes the counts of the number of students in the **specific categories** that you provided in **question 4**? (Circle only one number.)

- Each student with a disability is counted only once in the specific categories, by their only or primary disability (i.e., unduplicated counts of students)..... 1
- Students with multiple disabilities are counted multiple times in the specific categories (i.e., duplicated counts of students across disability categories)..... 2
- Other (please describe): _____ 3

6. Which *one* of the following *best describes* which students with disabilities are represented in the count that you provided in **question 2**? (Circle the one option that best applies.)

- Only students to whom services/accommodations were provided, regardless of whether disabilities were verified..... 1
- Students who provided verification of their disabilities, regardless of whether services/ accommodations were provided..... 2
- Students who identified themselves to your office as having a disability, regardless of whether disabilities were verified or services/accommodations were provided..... 3
- Students who have been reported to your office as having identified themselves as having a disability, regardless of whether your office had any contact with them. This includes information provided to your office about students with disabilities by other offices (e.g., the admissions or registrar's office), even if your office had no contact with them..... 4
- Other (please describe): _____ 5

7. Listed below are support services or accommodations **designed for** students with disabilities. Please indicate whether your institution provided that service or accommodation to a student with disabilities **in 2008–09** (12-month academic year). Include only services and accommodations designed for students with disabilities. Do not include services or accommodations available to all students, regardless of disability status. (*Circle one on each line.*)

	Yes	No
a. Sign language interpreters/transliterators.....	1	2
b. Real-time captioning.....	1	2
c. Oral interpreters/transliterators.....	1	2
d. Readers.....	1	2
e. Classroom notetakers or scribes.....	1	2
f. Faculty-provided written course notes or assignments.....	1	2
g. Adaptive equipment and technology (e.g., assistive listening devices, talking computers)	1	2
h. Physical adaptations to classrooms.....	1	2
i. Paratransit for on-campus mobility.....	1	2
j. Personal attendants.....	1	2
k. Independent living skills training.....	1	2
l. Audio textbooks/digitally recorded texts.....	1	2
m. Large print or Braille materials.....	1	2
n. Help with learning strategies or study skills.....	1	2
o. Tutors to assist with ongoing coursework.....	1	2
p. Alternative exam formats (e.g., large print, Braille, audio formats).....	1	2
q. Additional exam time.....	1	2
r. Course substitution or waiver.....	1	2
s. Priority class registration.....	1	2
t. Disability resource handbook.....	1	2
u. Career or placement services targeted for students with disabilities.....	1	2
v. Disability benefits counseling (e.g., SSI, SSDI, Medicare, Medicaid).....	1	2
w. Counseling about vocational rehabilitation services.....	1	2
x. Moving classes to a more accessible location.....	1	2
y. Other (<i>specify</i>) _____	1	2

8. Does your institution accept the following types of documentation as sufficient, stand-alone verification of student disabilities? (*Circle one on each line.*)

If your institution does not require verification of student disabilities, check here and go to question 9.

	Yes	No
a. IEP from a secondary school.....	1	2
b. 504 Plan from a secondary school.....	1	2
c. Vocational Rehabilitation Agency evaluation (if comprehensive).....	1	2

9. To what extent does the person or office responsible for providing support services to students with disabilities work, either formally or informally, with the state vocational rehabilitation agency regarding students with disabilities? (*Circle one.*)

Not at all..... 1 Minor extent..... 2 Moderate extent..... 3 Major extent..... 4 Don't know..... 5

10. Does your institution distribute any materials designed to encourage students with disabilities to identify themselves to the institution?

Yes..... 1 No..... 2

11. Which of the following kinds of education materials or activities, if any, does your institution provide for faculty and staff designed to assist them in working with students with disabilities? (*Circle one on each line.*)

	Yes	No
a. Faculty/staff handbook.....	1	2
b. Annual mailings or emails to faculty/staff.....	1	2
c. Workshops and presentations to faculty groups.....	1	2
d. One-on-one discussions with faculty/staff who request information or assistance.....	1	2
e. Information resources (e.g., books, videos) available for faculty/staff use.....	1	2
f. Collection of resources available on your institution's website.....	1	2
g. Other (<i>specify</i>) _____	1	2

12. During the current academic year (2009-10), does your institution have any programs designed specifically for postsecondary students with cognitive difficulties, intellectual disabilities or mental retardation?

Yes..... 1 (Continue with question 13.) No..... 2 (Skip to question 14.)

13. As of October 1, 2009, how many students were enrolled in your institution's programs designed specifically for postsecondary students with cognitive difficulties, intellectual disabilities or mental retardation?

14. To what extent does your institution's main website follow established accessibility guidelines or recommendations for users with disabilities (e.g., guidelines/recommendations from the World Wide Web Consortium)? (Circle one.)

If no website is used, check here and go to question 15.

Not at all..... 1 Minor extent..... 2 Moderate extent..... 3 Major extent..... 4 Don't know..... 5

15. Does your institution conduct any of the following activities related to accessibility? (Circle one on each line.)

	Yes	No
a. Conduct needs assessments pertaining to accessibility.....	1	2
b. Offer students, faculty, and staff the opportunity to provide input on accessibility features during project planning stages.....	1	2
c. Have procurement policies that promote the purchase of accessible products (e.g., technology)	1	2
d. Integrate accessibility features during major renovation and new construction projects.....	1	2
e. Provide regular training opportunities to faculty about ways to make instruction more accessible to all students.....	1	2

16. Does your institution provide the following services and accommodations to the general public? (Circle one on each line.)

	Yes	No
a. Offer printed materials in alternate formats.....	1	2
b. Publicize the availability of adaptive equipment, technology, or services at institution-sponsored events open to the public (e.g., assistive listening devices, sign language interpreters).....	1	2
c. Provide outreach to community members with disabilities.....	1	2

Use this definition in your response to question 17. Universal Design is an approach to the design of all products and environments to be as usable as possible by as many people as possible regardless of age, ability, or situation. Other terms for Universal Design include Design For All, Inclusive Design, and Barrier-Free Design. Universal Design can be distinguished from meeting accessibility standards in the way that the accessible features have been integrated into the overall design (from *Universal Design Education Online project*).

17. To what extent are the following barriers to implementing Universal Design features at your institution? (Circle one on each line.)

	Not at all	Minor extent	Moderat e extent	Major extent	Don't know
a. Lack of perceived need for services and accommodations.....	1	2	3	4	5
b. A focus on minimal legal requirements for accessibility and accommodations.....	1	2	3	4	5
c. Other institutional priorities.....	1	2	3	4	5
d. Lack of information and resources on Universal Design	1	2	3	4	5
e. Questions about the usefulness of Universal Design.....	1	2	3	4	5
f. Lack of incentives for faculty to change their instructional practices.....	1	2	3	4	5
g. Limited staff resources to provide faculty and staff with training on accessibility issues.....	1	2	3	4	5
h. Limited availability or interest on the part of faculty to participate in training opportunities related to accessibility issues.....	1	2	3	4	5
i. Costs associated with incorporating Universal Design features into major renovation and new construction projects.....	1	2	3	4	5
j. Costs associated with purchasing appropriate technology.....	1	2	3	4	5
k. Limited ability to adapt or retrofit existing facilities (e.g., historical considerations).....	1	2	3	4	5

