



TECHNICAL STANDARDS FOR ADMISSION VERIFICATION FORM BSN Completion

_____ I verify that I can meet the technical standards **without accommodations**.

OR

_____ Please review my request for accommodation to meet the following technical standard(s):

_____ 1. Observation/Sensory-motor

_____ 2. Communication

_____ a. Written communication

_____ b. Verbal and nonverbal communication

_____ c. Computer usage

_____ 3. Psychomotor

_____ 4. Intellectual-Conceptual, Integrative, and Quantitative

_____ 5. Behavioral and Social Attributes

Documentation that substantiates the disability should be submitted to University Disability Support Services (UDSS).

SIGNATURE _____ DATE _____

PRINTED NAME _____

*Email your completed and signed form to:
ReNEW@uwyo.edu or RN.BSN@uwyo.edu*