

ARC

720 Dowling Hall
617-627-5571

Notetaker Request

Last Name: _____ First Name: _____

SS#: _____ Class/School: _____

Local Address: _____

Phone Number: _____ E-mail: _____

Have you met with the Coordinator of Services for Students with Disabilities? (circle one)

Yes No

To process your request for notetakers, please fill out the following:

Class

Name of Professor
