

**Connecticut College
Office of Student Accessibility Services
Documentation Guidelines**

Autism Spectrum Disorder (ASD)

Important note to students who were on an IEP or 504 in high school:

*Please note that there are differences between the laws that govern accommodations in K-12 Education, which emphasize student success, and those that apply to postsecondary education, which emphasize equal access to educational opportunities. Because of these differences, you may not qualify for the same accommodations you received in the past in a different educational setting. Additionally, because of these differences, **an Individualized Education Plan (IEP) or 504 Plan are not sufficient documentation of a disability or the need for accommodations in higher education.***

Students are required to submit documentation by an appropriately qualified professional who verifies the presence of a condition that rises to the level of a disability and confirms the need for reasonable accommodations based on the diagnosed condition. The following professionals generally are considered qualified to evaluate and diagnose an Autism Spectrum Disorder *if they have comprehensive training in differential diagnosis* and direct experience in the assessment of Autism in an adolescent or adult population: licensed clinical psychologists, neuropsychologists, psychiatrists, developmental pediatricians or other comparably trained expert. The professional conducting the assessment must be an impartial individual who is not a family member nor in a dual relationship with the student.

1. The evaluating professional will need to provide a Diagnostic Report:

- ☐ Typed on letterhead
- ☐ Includes the date(s) of assessment and date of report
- ☐ Signature of the evaluating professional, their name, title, and professional credentials
- ☐ Must be current (*no older than three years* prior to date requesting accommodations)
- ☐ Must be evaluated on *adult measures*
- ☐ Include a clearly stated DSM-V or ICD-11 diagnosis and date of diagnosis (reference to a prior diagnosis alone is not sufficient)

2. The Diagnostic Report must also include the information listed below with evidence that the Autism Spectrum Disorder currently meets DSM-V criteria in nature and severity:

➤ **Evidence of Early Impairment and History**

- ☐ Relevant historical information including evidence symptoms arose in childhood, including the age of onset, and any academic or behavioral issues that were noted at the time
- ☐ Developmental and psychosocial history
- ☐ Family history, including any incidence of Autism Spectrum Disorder
- ☐ Educational history (including previous standardized test scores, prior psychoeducational reports, IEPs, 504 Plans, report cards and/or listings of previously obtained accommodations and evidence of their effectiveness)
- ☐ Relevant medical and medication history; effects of medication (either positive or negative), including whether the typical medical regimen was in effect at the time of the evaluation

➤ **Evidence of Current Impairment – Psycho-educational or Neuropsychological Assessment**

- ☐ Statement of current presenting problems
- ☐ Statement of what alternative diagnoses were ruled out as part of the assessment
- ☐ Summary of diagnostic information, including:
 - Diagnostic interview
 - Assessments conducted in determining the degree to which the Autism Spectrum Disorder currently impacts you relative to your academic performance. Such assessments typically include testing of intellect, achievement, processing speed, fluency, executive functioning, language, memory and learning, attention, etc.
 - Complete test scores with written interpretations from the evaluator (report complete test scores, not selective or partial scores) (see **Testing/Rating Scales** below)
 - Rationale and supporting data to substantiate the current diagnosis
 - Description of current functional limitations impacting two or more settings
 - Whether these functional limitations constitute a substantial limitation to a major life activity
 - Information regarding direct impact of diagnosed condition on academic performance and in academic setting
 - If not previously diagnosed or treated, what qualifying criteria is now present or different in the student's profile

➤ **Rationale for Recommended Accommodations**

- ☐ Recommended accommodations must be clearly linked to the evaluative information with a *discussion and rationale* of each accommodation being recommended
- ☐ List and discuss current and/or past accommodations that were utilized as well as an assessment of their effectiveness
- ☐ Include a statement about prior treatments and their effectiveness. If there were no prior treatments, an explanation of why none were in place

See Next Page for Testing/Rating Scales

Testing/Rating Scales:

At least one test in each of the following categories must be included in the battery. The Wechsler Adult Intelligence Scale is the preferred Aptitude/Cognitive Ability test and the Woodcock-Johnson – Tests of Achievement or the Wechsler Individual Achievement Test is the preferred Academic Achievement test.

The battery should not be limited to these two tests, but should include all tests necessary to clearly define the disability. All test scores and percentiles should be provided for all normed measures together with a narrative interpretation of these results.

Aptitude/Cognitive Ability:

Wechsler Adult Intelligence Scale (WAIS)

Woodcock-Johnson – Tests of Cognitive Ability

Academic Achievement:

Woodcock-Johnson – Tests of Achievement

Wechsler Individual Achievement Test (WIAT)

Scholastic Abilities Test for Adults (SATA)

Stanford Test of Academic Skills (TASK)

Wide Range Achievement Test (WRAT)

And specific tests as relevant, for example (this list is not exhaustive):

Gray Oral Reading Test (GORT)

Nelson-Denny Reading Test

Test of Written Language – 3 (TOWL-3)

Test of Word Reading Efficiency (TOWRE)

Woodcock Reading Mastery Tests – Revised

Compr. Test of Phonological Processing (CTOPP)

Wechsler Memory Scale (WMS)

Beery Visual-Motor Integration (Beery VMI)

Modern Language Aptitude Test (MLAT)

Rating Scales - Self-rated or interviewer-rated scales for categorizing and quantifying the nature of the impairment may be useful in conjunction with other requested data.

Selected examples include:

Adult ADHD Self-Report Scale (ASRS v1.1)

Adult ADHD Clinical Diagnostic Scale (ACDS) v1.2

Brown Attention-Deficit Disorder Symptom Assessment Scale (BADDS) for Adults

ADHD Rating Scale-IV (ADHD-RS-IV)

Conners-Wells' Adolescent Self-Report Scale

Brief Psychiatric Rating Scale (BPRS)

Adapted from
AHEAD Best Practices
ETS-Education Testing
Services Guidelines