

Council for Homeopathic Certification

Request for Reasonable Accommodations for Testing

Applicants requesting reasonable accommodations for disabilities covered by applicable laws must complete the following steps and submit requests **BEFORE** applying for the exam:

- Provide documentation of an evaluation and/or diagnosis by a healthcare professional.
 - The documentation must have been completed within the last three (3) years.
 - The evaluation/diagnosis must be within the professional's scope of practice.
 - If testing was performed on the applicant, the results of those tests must be provided.
 - The documentation must be signed by the healthcare professional on official letterhead. The professional must be clearly identified by name and profession.
 - The documentation must clearly state the evaluation/diagnosis and specify the accommodations the candidate requires to experience fair administration of the exam. The accommodations must be presented as a requirement given the nature of the disability, not as a suggestion.
 - Documentation from a school psychologist is only acceptable if the applicant is still a student in that school system. IEPs and 504 Plans from an applicant's secondary education or earlier are not acceptable because they are not the evaluations of licensed professionals, and they are not assessments of the applicant as an adult.
- Provide a letter from his/her professional program attesting to the nature of the accommodations that were provided for testing throughout the course of study, if the applicant has received accommodations from a school or course of study within the last three (3) years.

Reasonable Accommodation Process

During the open exam registration cycle, the request form, letters from treating practitioners, and other supplemental supporting documentation must be submitted to chcinfo@homeoapthicdirectory.com or PO Box 75, Chartley, MA 02712. The applicant should not proceed with the registration process for the exam without first hearing from the CHC regarding the accommodation.

Within 2 weeks of receiving the request, the Examination Committee will determine whether the accommodation is valid under the ADA and whether accommodations requested can be met. If the CHC can accommodate the applicant, the applicant may apply for the exam.

The Reasonable Accommodation Request form is available through Certifior, on the CHC website, by email: chcinfo@homeopathicdirectory.com, or by phone: 866-242-3399.

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Request for Reasonable Accommodations for Testing Form

| Name | meDate of Birth | | |
|----------------------------------|--|----------------------|---------------------------------|
| Address: | | | |
| | | | Country: |
| Phone | Email | | |
| Is this your initial application | for certification or a retake? | Initial | |
| If this is a retake, have you | u received accommodations on p | revious CHC exams | s? ☐ Yes ☐No |
| Description of disability: | | | |
| When was this disability first | diagnosed? | | |
| What measures are used to | mitigate its impact? | | |
| What accommodations have | you received for past standardiz | ed testing or in you | r formal homeopathic education? |
| Accommodation(s) being red | quested:]Time and a half | ime ☐ Other (ex | plain) |
| Reader | xplain): | · | |
| | | | |
| How will the accommodation | ns requested reduce the impact o | f the disability? | |
| | | | |
| or cancel my scores if it is so | pove information is accurate. I und ubsequently determined that, in the imentation is either questionable, | ne CHC's judgment | , any information presented on |
| Signature: | | | _Date: |
| | | | |