



GUIDELINES FOR DOCUMENTATION OF LEARNING DISABILITIES

Please refer to General Guidelines for Disability Documentation in addition to these specific guidelines for learning disabilities. The general guidelines are available at the Office of Disability Services or online at www.health.columbia.edu/ods/.

The following guidelines describe the necessary components of acceptable documentation for students with learning disabilities. Students are encouraged to provide their clinicians with a copy of these guidelines.

1. Testing must be **current**: administered within the past five years or past three years if the student is not yet 18 years of age. Although, learning disabilities are generally considered to be lifelong, because the provision of all reasonable accommodations and services is based upon assessment of the current impact of the student's disabilities on his/her academic performance, it is necessary to provide current documentation.
2. Dates of testing must be included in the report.
3. Testing must be performed by a qualified evaluator who is unrelated to the student by birth or marriage: clinical or educational psychologists, neuropsychologists, learning disabilities specialists, or physicians known to specialize in learning disabilities. Information about their professional credentials, including licensing and certification, and their areas of specialization must be clearly listed in the report. The University reserves the right to require that a certified copy of the report be transmitted directly from the evaluator to the University.
4. Testing must involve a comprehensive psychoeducational evaluation, and include a diagnostic interview and clinical summary.
5. The evaluation report must indicate the norm-reference group. For example, the report must specifically indicate how the student performs in relationship to the average person in the general population.
6. Relevant Testing:
 - Actual scores from all instruments must be provided with standard scores and percentile rank scores.
 - The most recent edition of each assessment instrument must be administered.
 - The report must indicate the norm-reference group. For example, the report must specifically indicate how the student performs in relationship to the average person in the general population

The following areas must be addressed using standardized instruments:

Aptitude: The *Weschler Adult Intelligence Scale III (WAIS-III)* with subtest scores is the preferred instrument. The *Woodcock-Johnson Psychoeducational Battery III: Tests of Cognitive Ability* or the *Stanford-Binet Intelligence Scale-IV* are acceptable. Brief versions or screening measures are not comprehensive, including the Kaufman Brief Intelligence Test and the Slosson Intelligence Test-Revised, are not accepted.

The WAIS-III will not be accepted after January 1, 2010. Evaluations occurring after this date must include the WAIS-IV.

Achievement: Assessment of comprehensive academic achievement in the areas of reading (decoding and comprehension), mathematics (calculation and problem solving), oral language, and written expression (spelling, punctuation, capitalization, writing samples) is required. The *Woodcock-Johnson Psycho-educational Battery III: Tests of Achievement* is the preferred instrument. The *Scholastic Abilities Test for Adults (SATA)* and the *Stanford Test of Academic Skills (TASK, Wechsler Individual Achievement Test - II (WIAT-II) or specific achievement tests such as)* are acceptable.

Please note:

- The *Wide Range Achievement Test 3 (WRAT-3)* is NOT a comprehensive measure of achievement and therefore should not be the only measure of overall achievement utilized.
- Multiple reading assessments must be provided in order to establish the need for audio/electronic text books as an accommodation or documenting a reading disability. The *Nelson-Denny Reading Test* form G or H, *Gray Oral Reading Test (GORT- 4th Edition)*, *Test of Word Reading Efficiency (TOWRE)*, and reading subtests of the *Woodcock-Johnson Tests of Achievement* are acceptable. If the impairment involves reading speed, the *NDRT* should be administered under both standard time and extended time conditions. Informal measures should be included as well.

Cognitive and Information Processing: Specific areas of cognitive and information processing must be assessed. These domains include, but are not limited to

- memory (i.e., visual and verbal acquisition, retrieval, retention, and recognition)
- processing speed and cognitive fluency (e.g., timed psychomotor or graphomotor tasks, decision and naming fluency)
- attention (e.g., visual and auditory spans of attention, scanning tasks, and vigilance assessment, including continuous performance tasks)
- sensory-perceptual functioning (e.g., high-level visual, auditory, and tactile tasks)
- executive functioning (e.g., planning, organization, prioritization, sequencing, self-monitoring)
- motor functioning (e.g., tests of dexterity and handedness)
- visual acuity and possible need for prescription eye glasses.

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Use of the *Woodcock-Johnson Psychoeducational Battery III-Tests of Cognitive Ability* (Standard Battery-subtests 1-10) or subtests from the *Wechsler Adult Intelligence Scale III (WAIS-III)* are preferred. *California Verbal Learning Test (CVLT-II)*, *Detroit Test of Adult Learning Aptitude (DTLA-A)*, *Detroit Test of Learning Aptitude -3 (DTLA-3)*, *Halstead-Reitan Neuropsychological Test Battery*, *WAIS-III Working Memory Index (WMS)*, *Wide Range Assessment of Memory and Learning - Second Edition (WRAML-2)*, *Wechsler Memory Scales — III (WMS-III)* are acceptable and should supplement the WJ-III.

7. A diagnosis as per the American Psychiatric Association's *Diagnostic and Statistical Manual – IV TR (DSM-IV-TR)* is required. Terms such as “learning problems,” “learning differences,” “weaknesses,” etc., are not the equivalent of learning disability.
8. Testing must demonstrate that a learning disability currently and substantially limits a major life activity, and indicate how the student's current participation in courses, programs, services, or any other activity of the University may be affected with or without the use of mitigating measures. Towards this end, a diagnosis of a learning disability may not sufficiently demonstrate a need for accommodations.

Please also note:

- While a student's Individualized Educational Plan (IEP) may be submitted as evidence of past accommodations, it alone is not sufficient documentation. An IEP is the plan that the student's high school team developed to promote the student's academic success.
- For accommodation requests on the basis of Attention Deficit/ Hyperactivity Disorder, refer to documentation guidelines for this disorder (www.health.columbia.edu/ods).