# Fundamental Alteration Review Form

## Course Information

**\*Course:**

**\*Section:**

**\*Instructor:**

**\*Department Chair:**

**\*Semester:**

## \*Accommodation(s) Under Review:

Please complete the following and provide a copy of your syllabus.

|  |  |
| --- | --- |
| List the core competency (CC) or course learning outcome (CLO) affected by this/these accommodation(s). |  |
| What fundamental function does this CC or CLO serve in the course? |  |
| Is this fundamental CC or CLO clearly identified in the syllabus? (Provision of the current syllabus will be requested). |  |
| How does the accommodation fundamentally alter this CC/CLO? |  |
| How will the accommodation hinder the student’s learning and ability to pass the course? |  |
| Suggestions for an alternative accommodation. |  |