

Alternate Format Textbook Request Form

If you are a student who has registered with the Disability Student Services Office and have a diagnosed disability that prevents you from using standard instructional materials and would like to request an electronic copy of your textbooks please complete the information below and submit to the DSS office. **YOU MUST FIRST PURCHASE THE TEXTBOOK AND PROVIDE A HARD COPY OF SCANNED IN COPY OF THE RECEIPT OF PURCHASE BEFORE A REQUEST CAN BE SUBMITTED FOR AN ELECTRONIC TEXT.**

Student Information	
Semester Requesting Textbooks	
Student's Full Name	
RIN #	
Student's Email Address	
Student's Local Address	
City, State, Zip Code	
Course 1 Information	
Instructor's Name	
Course Name	
Textbook 1 Information	
Textbook Title	
Edition	
Author	
ISBN Number	
Publisher	
Date of Textbook Purchase	
Location of Textbook Purchase	
Purchase Price	
Course 2 Information	
Instructor's Name	
Course Name	
Textbook 2 Information	
Textbook Title	
Edition	

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Author	
ISBN Number	
Publisher	
Date of Textbook Purchase	
Location of Textbook Purchase	
Purchase Price	
Course 3 Information	
Instructor's Name	
Course Name	
Textbook 3 Information	
Textbook Title	
Edition	
Author	
ISBN Number	
Publisher	
Date of Textbook Purchase	
Location of Textbook Purchase	
Purchase Price	
Course 4 Information	
Instructor's Name	
Course Name	
Textbook 4 Information	
Textbook Title	
Edition	
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Publisher	
Date of Textbook Purchase	
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Purchase Price	

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Course 5 Information	
Instructor's Name	
Course Name	
Textbook 5 Information	
Textbook Title	
Edition	
Author	
ISBN Number	
Publisher	
Date of Textbook Purchase	
Location of Textbook Purchase	
Purchase Price	
Course 6 Information	
Instructor's Name	
Course Name	
Textbook 6 Information	
Textbook Title	
Edition	
Author	
ISBN Number	
Publisher	
Date of Textbook Purchase	
Location of Textbook Purchase	
Purchase Price	

Alternate Format Textbook Request Form**Agreement on the Use of Recorded, Electronic or Other
Alternatively Formatted Course Materials**

- I agree that I am enrolled for the semester and the particular course(s) for which I am requesting alternatively formatted instructional materials.
- I have provided the designated college official with appropriate documentation of the disability that prevents me from using standard instructional material. I understand that this documentation will be kept on file at the college.
- I understand that I must purchase instructional materials at the same cost as other students.
- I agree that I will not copy or reproduce alternatively formatted instructional materials nor allow anyone else to do so pursuant to the requirements of the copyright revision act of 1976 as amended (17 U.S.C. §101 et seq.).
- I will not share alternatively formatted materials with any other party.
- I understand that any violation of this agreement may be considered a violation of the college's Student Code of Conduct and may result in penalties including suspension and expulsion. Violations may also constitute a violation of federal and/or state laws and may result in civil or criminal prosecution, payment of fines or other moneys to the copyright holder, and/or incarceration.

I have read and understand the policies and procedures outlined above and agree to comply with them.

Signature of Student

Date

Signature of College Representative

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