Student Agreement

- I am enrolled for the semester in course(s) for which I am requesting alternatively formatted instructional materials.
- I have provided the Maryland State Library for the Blind and Physically Handicapped with appropriate documentation of the disability that prevents me from using standard instructional material.
- 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
- I will not share alternatively formatted materials with any other party.

Before receipt of materials, this agreement shall be signed by the student and the designated Library official and kept on file each semester in which the student requests alternatively formatted materials.

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

Signature of Student ________________________________ Date ____________

Signature of Library Representative ___________________________ Date ____________

marylandpublicschools.org/divisions/lds.html
Confidential Information Release Form

I, __________________________ agree to allow the University of Maryland DSS office to: □ Release  □ Obtain

(Please print clearly)

REASON FOR REQUEST: Obtain accessible textbooks from Bookshare.org and Maryland Accessible Technology (MAT) Program

Release to: Send to: Bookshare.org & Maryland Accessible Textbook (MAT) Program /Ms. Stephanie Durnford

☐ Phone: (410) 230-2447

☐ Address: 415 Park Avenue, Baltimore, MD 21201; Fax: (410) 333-2095; sdurnfo@lbph.lib.md.us

* Complete this section for both “Release and Obtain” request sections.

_________________________________ Signature of Client

_________________________________ Date of Birth

_________________________________ Contact Phone

_________________________________ Email address

For Office Use Only >

DSS Staff Member Name __________________________ Signature __________________________ Date __________________________