Spread the Word to End the Word
Fact Sheet

WHAT
Spread the Word to End the Word is an ongoing effort by Special Olympics, Best Buddies and our supporters to raise the consciousness of society about the dehumanizing and hurtful effects of the R-word and encourage people to pledge to stop using the R-word.

The campaign, created by youth, is intended to engage schools organizations and communities to rally and pledge their support at www.r-word.org and to promote the inclusion and acceptance of people with intellectual and developmental disabilities.

WHEN
The official annual day of awareness is held the first Wednesday of every March. While most activities are centered on or near that annual day in March, people everywhere can help spread the word throughout their communities and schools year-round thru pledge drives, youth rallies and online activation.

WHO
Spread the Word to End the Word was founded by college students Soeren Palumbo (Notre Dame 2011) and Tim Shriver (Yale 2011) in 2009, and continues to be led by passionate young people, Special Olympics athletes and Best Buddies participants across the United States and in many other parts of the world.

WHY
Respectful and inclusive language is essential to the movement for the dignity and humanity of people with intellectual disabilities. However, much of society does not recognize the hurtful, dehumanizing and exclusive effects of the R-word.


HOW
Visit www.r-word.org to learn how you can Spread the Word to End the Word.

For more information, contact:

Mandy Murphy, Special Olympics
mmurphy@specialolympics.org
202-824-0227

Or

Heather Schatz, Best Buddies
heatherschatz@bestbuddies.org
305-374-2233, ext. 207
College Programs for Students with Intellectual and Developmental Disabilities: Results of a National Survey

By Clare K. Papay, Arcadia University and Linda M. Bambara, Lehigh University

Providing transition services for students with intellectual and developmental disabilities (IDD) on a college campus creates opportunities for academic, vocational, and social skills instruction in a community setting with college-age peers. A survey conducted in 2008 of college programs in the U.S. for students with IDD ages 18–21 (Papay & Bambara, 2011) gathered information on these programs and the opportunities they provide. Survey questions addressed the characteristics of postsecondary education programs and the extent to which students with IDD were participating in college classes.

Fifty-two program coordinators from eligible programs identified through the Think College database completed the survey (64% response rate). Programs were located on two-year or community college campuses (57.7%) and four-year college or university campuses (42.3%). The survey asked respondents to choose a model of practice that described the program at their school: individualized, mixed, or separate. These models were defined as follows:

- Individualized programs focus on typical college activities that meet the needs of an individual student with no instruction in separate settings (n = 6, 11.5%).
- Mixed programs provide opportunities for inclusive activities with typical college students as well as life-skills or vocational instruction in separate settings (n = 36, 77%).
- Separate programs focus on life-skills instruction in separate settings with students with disabilities only and no opportunities for inclusive activities with typical college students (n = 6, 11.5%).

KEY FINDINGS

PURPOSE, FUNDING, AND ENROLLMENT

Purposes cited by coordinators for operating a program on a college campus included employment (90%), inclusion with same-age peers (75%), independent living skills (75%), and participating in college classes (63%) (see Table 1). Most programs were operated by school districts (56%) and relied on school-district funding (87%), but other sources of funding, including tuition and grants, were also reported.

Across all programs, the median enrollment was 12 students. Mean enrollment was almost 25 students due to a small number of programs with much larger enrollment. Program enrollment was larger in separate and mixed programs than in individualized programs.

ADMISSIONS CRITERIA

The most common admissions criterion reported was student age (87%). More than half of the programs (52%) reported that students must indicate a desire to be on campus; the same percentage of programs reported excluding students who exhibit challenging behavior. Forty-six percent of programs reported that students must live in a particular school district. Individualized programs reported fewer admissions criteria, suggesting that these programs can be flexible in the types of students admitted.
LEVEL OF PARTICIPATION IN AND TYPES OF COLLEGE CLASSES

Less than one quarter of all students (24%) in the programs surveyed were reported to be taking college classes. However, 100% of individualized programs and 85% of mixed programs reported that at least one student in their program was taking a college class. Students with higher academic abilities were more likely to be taking classes for credit, whereas students with limited academic abilities were more likely to be taking classes informally.

The majority of classes taken for credit were vocational and remedial classes; the majority taken informally or audited were academic, health and fitness, and arts classes. At two-year and community colleges, more classes were reported to be taken for credit, whereas at four-year colleges, more classes were reported to be taken informally.

IMPLICATIONS

Postsecondary education programs are a promising approach to providing transition services in an age-appropriate and inclusive setting. However, the results of this survey demonstrate disparity across existing programs, both in their focus and in the access they offer to inclusive courses.

Difficulties were encountered in identifying only those programs that were serving transition-age students, and it is possible that there were additional programs not represented in the database and therefore not included in the survey. Therefore, these results may not accurately represent all postsecondary education programs for transition-age students with IDD. Further research is needed to examine the quality of services and outcomes of college-based transition programs for this population of students.

REFERENCES


Table 1

Overall Purpose of Being on a College Campus as Cited by Program Coordinators by Type of Postsecondary Program

<table>
<thead>
<tr>
<th>Purpose of Being on Campus</th>
<th>All (90%)</th>
<th>Individualized</th>
<th>Mixed (90%)</th>
<th>Separate (83%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>To gain employment or opportunities for vocational training</td>
<td>47 (90%)</td>
<td>6 (100%)</td>
<td>36 (90%)</td>
<td>5 (83%)</td>
</tr>
<tr>
<td>To experience inclusion with same-age peers</td>
<td>39 (75%)</td>
<td>5 (83%)</td>
<td>30 (75%)</td>
<td>4 (67%)</td>
</tr>
<tr>
<td>To develop independent living skills</td>
<td>39 (75%)</td>
<td>5 (83%)</td>
<td>30 (75%)</td>
<td>4 (67%)</td>
</tr>
<tr>
<td>To receive postsecondary education/to participate in college classes</td>
<td>33 (63%)</td>
<td>6 (100%)</td>
<td>27 (67.5%)</td>
<td>0 (0%)</td>
</tr>
</tbody>
</table>

AUTHORS

Clare K. Papay is an assistant professor of special education at Arcadia University in Glenside, Pennsylvania.

Linda M. Bambara is a professor of special education at Lehigh University in Bethlehem, Pennsylvania.

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## Differences Between High School and College: IDEA vs. ADA

<table>
<thead>
<tr>
<th>Secondary School</th>
<th>Higher Education</th>
</tr>
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<tbody>
<tr>
<td>Education <strong>is a right</strong> under IDEA and must be provided in an appropriate environment to all individuals.</td>
<td>Education <strong>is not a right</strong>. Students must meet admission criteria defined under ADA as &quot;otherwise qualified&quot;.</td>
</tr>
<tr>
<td>School district is responsible to identify a student's disability.</td>
<td>Students must self-identify.</td>
</tr>
<tr>
<td>School district provides free testing, evaluation, and transportation to program.</td>
<td>Student must provide current and appropriate documentation as defined by the college. If documentation from high school is not adequate, student pays for additional testing and transport to program.</td>
</tr>
<tr>
<td>Transition planning and timelines exist to clarify students' vision, identify programming choices and coordinate appropriate coursework options.</td>
<td>Students make all coursework selections.</td>
</tr>
<tr>
<td>School district develops IEP to define educational supports and services under special education.</td>
<td><strong>No IEP/special education in college.</strong></td>
</tr>
<tr>
<td>IEP Team (including student) determines IEP supports and services that will be provided.</td>
<td>Student is responsible to contact faculty and advocate for services.*</td>
</tr>
<tr>
<td>Access to general curriculum, necessary modifications, and a variety of appropriate accommodations are available.</td>
<td>No fundamental alterations to the curriculum are made. Academic accommodations and modifications are available based on student's documented disability.</td>
</tr>
<tr>
<td>Personal services for medical or physical disability are required.</td>
<td>No personal services are required.**</td>
</tr>
</tbody>
</table>

*Although responsibility lies with the student, DSS works closely to develop a Faculty Request for Services and will advocate if difficulty arises

**Disability Support Services may assist students in efforts to advocate for such services.
<table>
<thead>
<tr>
<th>Differences between High School and College: DEPENDENCE vs. INDEPENDENCE</th>
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<tbody>
<tr>
<td><strong>Secondary School</strong></td>
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<tr>
<td>School year is from September to June</td>
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<tr>
<td>The main office exists as the center of activity for school.</td>
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<tr>
<td>Rigid schedule with constant supervision</td>
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<tr>
<td>Classes meet daily</td>
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<tr>
<td>Attendance is taken</td>
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<tr>
<td>Guidance counselors or other staff schedule support services for students</td>
</tr>
<tr>
<td>Someone is available to help plan study time (teachers, SPED, parents)</td>
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<tr>
<td>Classes generally held in one building</td>
</tr>
<tr>
<td>Average class is 35 - 45 minutes</td>
</tr>
<tr>
<td>Daily contact w/teachers and support staff</td>
</tr>
<tr>
<td>Parent permission required (until 18 years).</td>
</tr>
<tr>
<td>Students generally live at home.</td>
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</tbody>
</table>

Information obtained from materials at http://www.thinkcollege.net/families/index.php?page=high
Tips for Successful Transition to College for Students with Disabilities

1. The student should be involved in his or her Individualized Education Plan (IEP) meetings and decisions in high school.

2. The student should start career exploration early in his or her high school career. Ask the school to provide career assessments.

3. The student should contact college admissions about college requirements at beginning of high school in order to take the appropriate college preparation courses in high school.

4. The student should do research (on the Internet, in the library, etc.) about their disability. The student should know how his or her disability may affect college life (classroom, dormitory, activities, etc.).

5. The student should begin utilizing appropriate college academic aids, services or accommodations and begin to wean off of those that are not realistic in future settings.

6. The parent should give the student permission to apply to the Department of Rehabilitative Services as needed and appropriate. All contact information may be located at http://www.mdrs.state.ms.us/.

7. The parent should begin to look at the cost, financial aid, and affordability of colleges that the student has chosen to apply. The parent should fill out the Free Application for Federal Student Aid (FAFSA) at http://www.fafsa.ed.gov/ when the student applies for college(s).

8. The parent and student should go the education planner web site at http://www.educationplanner.com/education_planner/. This site provides information for planning for college.

9. The student should make an informed decision about choosing the right college environment (e.g., class size, rural vs. city, climate or temperature, large student body vs. medium/small). Students should know as much about
the college environment as possible prior to filling out applications (talk to other students, talk to faculty/staff, research the college web site etc..) to find an appropriate match.

10. The students should tour the college campus prior to filling out an application. The college disability office should be included in the tour.

11. The student should be aware of application dates and deadlines.

12. The student should research the disability services provided at the college (go to the disability services web site or call for information).

13. The student should have a face-to-face appointment with the disability office staff.

14. The student should submit documentation to the disability office in the fall or winter before graduation to determine eligibility for services at the college.

15. The student should have an assistive technology evaluation if utilizing technology in college.

16. The student should make sure that all documentation submitted to the disability office meets the documentation guidelines of that college.

17. The student should make a follow-up appointment with the disability services office prior to arriving on campus to ensure that services will be in place upon arrival.

18. The student should make an appointment during the summer or at least by the first week of classes to meet with the disability services office to obtain academic adjustment letters and take care of last-minute details regarding their academic adjustments, auxiliary aids, and/or services.

Information obtained from materials by Bill Welsh, Director, The Office for Disability Services, Penn State University
Help, hope and answers.
Easter Seals provides exceptional services, education, outreach, and advocacy so that people living with autism and other disabilities can live, learn, work and play in our communities.

Myths and Facts About People with Disabilities

Everybody's fighting some kind of stereotype, and people with disabilities are no exception. The difference is that barriers people with disabilities face begin with people's attitudes — attitudes often rooted in misinformation and misunderstandings about what it's like to live with a disability.

Myth 1: People with disabilities are brave and courageous.
Fact: Adjusting to a disability requires adapting to a lifestyle, not bravery and courage.

Myth 2: All persons who use wheelchairs are chronically ill or sickly.
Fact: The association between wheelchair use and illness may have evolved through hospitals using wheelchairs to transport sick people. A person may use a wheelchair for a variety of reasons, none of which may have anything to do with lingering illness.

Myth 3: Wheelchair use is confining; people who use wheelchairs are "wheelchair-bound."
Fact: A wheelchair, like a bicycle or an automobile, is a personal assistive device that enables someone to get around.

Myth 4: All persons with hearing disabilities can read lips.
Fact: Lip-reading skills vary among people who use them and are never entirely reliable.

Myth 5: People who are blind acquire a "sixth sense."
Fact: Although most people who are blind develop their remaining senses more fully, they do not have a "sixth sense."

Myth 6: People with disabilities are more comfortable with "their own kind."
Fact: In the past, grouping people with disabilities in separate schools and institutions reinforced this misconception. Today, many people with disabilities take advantage of new opportunities to join mainstream society.

Myth 7: Non-disabled people are obligated to "take care of" people with disabilities.
Fact: Anyone may offer assistance, but most people with disabilities prefer to be responsible for themselves.

Myth 8: Curious children should never ask people about their disabilities.
Fact: Many children have a natural, uninhibited curiosity and may ask questions that some adults consider embarrassing. But scolding curious children may make them think having a disability is "wrong" or "bad." Most people with disabilities won't mind answering a child's question.
Myth 9: The lives of people with disabilities are totally different than the lives of people without disabilities.
Fact: People with disabilities go to school, get married, work, have families, do laundry, grocery shop, laugh, cry, pay taxes, get angry, have prejudices, vote, plan and dream like everyone else.

Myth 10: It is all right for people without disabilities to park in accessible parking spaces, if only for a few minutes.
Fact: Because accessible parking spaces are designed and situated to meet the needs of people who have disabilities, these spaces should only be used by people who need them.

Myth 11: Most people with disabilities cannot have sexual relationships.
Fact: Anyone can have a sexual relationship by adapting the sexual activity. People with disabilities can have children naturally or through adoption. People with disabilities, like other people, are sexual beings.

Myth 12: People with disabilities always need help.
Fact: Many people with disabilities are independent and capable of giving help. If you would like to help someone with a disability, ask if he or she needs it before you act.

Myth 13: There is nothing one person can do to help eliminate the barriers confronting people with disabilities.
Fact: Everyone can contribute to change. You can help remove barriers by:
- Understanding the need for accessible parking and leaving it for those who need it
- Encouraging participation of people with disabilities in community activities by using accessible meeting and event sites
- Understanding children's curiosity about disabilities and people who have them
- Advocating a barrier-free environment
- Speaking up when negative words or phrases are used about disability
- Writing producers and editors a note of support when they portray someone with a disability as a "regular person" in the media
- Accepting people with disabilities as individuals capable of the same needs and feelings as yourself, and hiring qualified disabled persons whenever possible

Courtesy of Easter Seals Inc. 233 South Wacker Drive, Suite 2400 Chicago, IL 60606
1-800-221-6827 (toll-free)
Easter Seals and its affiliate organizations are 501(c)(3) nonprofit organizations.
Switching to an Adult Doctor

Sometimes it seems that just when you finally get used to something, everything changes. Well, the same is true for when you transition, or switch, from a pediatrician (doctor who mostly treats children) to an ‘adult’ doctor. Planning is the key to a great partnership, and here are some tips as you begin your planning.

- Begin planning long before you actually need to switch. That way, you will not be rushed when the time comes and you will have plenty of time to get to know your new doctor and healthcare team.

- Ask your current doctor if she or he has any recommendations, suggestions for a good adult doctor, for you. You have probably been seeing your doctor for a while and she or he knows you and may know of a good ‘fit’.

- Create a description with your current doctor explaining in a clear way, what your disability is. Including a list of major surgeries, treatments and current medication. This way you understand what you need the new doctor to know, and YOU can explain it to them.

- Make sure your new doctor and healthcare team have experience working with others with your disability and/or healthcare needs. If that is not possible ask your current doctor for good resources so that the new doctor can learn about your disability from helpful accurate information.

- When you have a new doctor in mind, see if you can schedule a time to meet with him or her and ask questions. Use this opportunity to share your personal dreams and goals, so that you and your new team can be clear about how you expect to live your life and make sure that they will be there to support your choices.

- When you have chosen a new doctor, make sure to have your medical records transferred, before your first visit.

- Remember, you have the right to privacy and can talk with your doctor alone (without your parents) if you need to.

RESOURCES

Transition to Adulthood—Contacts to Consider

http://depts.washington.edu/healthtr/Timeline/adulthood.htm

Visit Kids As Self Advocates on the web at:  www.fvkasa.org

KASA is a project of FAMILY VICTIMS.  2340 Alamo SE, Suite 102, Albuquerque, NM 87106
Ph: 1-888-835-5669   Fax: 505-872-4780   Email: info@fvkasa.org
This is part of the Adolescent health transition Project, part of the Center on Human development and Disability at the University of Washington. This is the adult transition timeline, things to consider.

Healthy & Ready to Work

www.hrtw.org/healthcare/hth_care.html

The National Healthy & Ready To Work project has excellent resources on health care financing and access. On this part of the website, they offer resources and information on confidentiality, access and paying for your health care.
Tips on Preparing for a Doctor’s Appointment

Kellie Haigh is 25 years old. She lives in Oxford, Iowa.

Going to a doctor’s appointment can be stressful. It helps me if I prepare for the doctor’s appointment before I go. Here are some tips on information that you need to get together before you go to the appointment.

➢ Gather your insurance information. You need to bring your insurance card with you to your appointment. The receptionist will make a copy of this card. This card has information that tells the doctor’s office staff who is responsible for paying the bill for your appointment. Some people have more than one type of insurance. For example, you might have private health insurance and Medicare. If you have more than one type of insurance, knowing which health insurance is your “primary insurance,” the insurance the doctor’s office bills first, is important. Be sure and bring all of your insurance cards with you to the appointment.

➢ Make a list of your medications. The doctor needs to know all of the medications that you are taking. Write down the name of the medication and the number of the milligrams that you take. Also, write down how often you take it. You can find all of this information on the medication bottle. It is also a good idea to write down the reason that you take the medication. This is helpful to the doctor because some medications are used to treat more than one condition. Also, be sure and include on your list any vitamins or herbal supplements that you take.

➢ Think about your health history. Take some time to think about your health history and what you need to tell the doctor about your health history. Have you had any major surgeries? Have you been hospitalized? Have you been treated for any other serious medical conditions? Write down when these events happened so that it is easier to remember to tell the doctor.

➢ Think about your family’s health history. Doctors often ask about your family’s health history. Knowing your family’s health history will help the doctor treat you. This is because if someone in your family has an illness, then you may be at higher risk for it. If you are at higher risk, then the doctor can monitor, or check you over time, for that illness. It is much easier to think about

Visit us on the web www.fvkasa.org

KASA, a project of Family Voices 2340 Alamo SE, Suite 102 Albuquerque, NM 87106
Ph: 505/872-4774    Fax: 505/872-4780 E-mail: julie@fvkasa.org
this before you go to the appointment. Has anyone in your family had a major illness, such as cancer, diabetes, or heart disease? It is okay if you do not know the answer to these questions. If possible, you might want to ask a parent or other relative if they know about your family’s health history. Be sure and write down what you find out, and bring it with you to the appointment.

You have prepared for the appointment, and now you are at the doctor’s office. Here are some tips about the information that you want to get from your doctor during the appointment.

➢ Take notes during the appointment. It is hard to remember everything that the doctor says, so it is important to write it down. Don’t be afraid to ask the doctor to stop for a moment so that you can take notes.

➢ Ask questions about prescriptions. If the doctor suggests a new medication, ask questions about it. What is the prescription for? How long does it take to start working? How will you know when it is working? Are there any side effects that you should know about? How much of the medication are you supposed to take? How often do you take it? What does the doctor want you to do if you have a problem with the medication? How much does the medication cost? Will your insurance pay for the medication? Be sure and get all of your questions answered about the medication before you leave the doctor’s office.

➢ Ask questions about tests. If the doctor wants you to have a medical test, make sure that the doctor tells you all about it. What is the test for? What kind of information does the doctor think the test will provide? Will your insurance pay for the test? If the insurance will not pay for the test, how much will it cost? What does it feel like to take the test? Does it take a long time? You have the right to know these things before deciding whether or not to have the test.

➢ Get copies of your medical records. You have the right to get copies of your medical records if you want to read them. You will have to sign a release to get the records, and you will have to pay to have them copied. If you have questions about your records, then you can always ask for a copy.

Resources: See “KASA Surviving a Doctor’s Appointment” and “KASA Keeping Track of Health Care Information,” both available on the KASA website.

Visit us on the web www.fvkasa.org
KASA, a project of Family Voices 2340 Alamo SE, Suite 102 Albuquerque, NM 87106
Ph: 505/872-4774  Fax: 505/872-4780  E-mail: julie@fvkasa.org
Disability Resources

Employers' Responsibilities

Employers with 15 or more employees are prohibited from discriminating against people with disabilities by Title I of the Americans with Disabilities Act (ADA). In general, the employment provisions of the ADA require:

- equal opportunity in selecting, testing, and hiring qualified applicants with disabilities;
- job accommodation for applicants and workers with disabilities when such accommodations would not impose "undue hardship;" and
- equal opportunity in promotion and benefits.

The Department of Labor's Office of Disability Employment Policy (ODEP) provides information on the ADA, but it does not enforce any part of the law.

Other federal laws bar discrimination on the basis of disability in employment and are either enforced or administered by the Department of Labor. The primary such law is Section 503 of the Rehabilitation Act of 1973, which requires federal contractors and subcontractors with government contracts in excess of $10,000 to take affirmative action to employ and advance in employment qualified individuals with disabilities. The Office of Federal Contract Compliance Programs (OFCCP) is responsible for enforcing Section 503.

The Department's Civil Rights Center (CRC) enforces the employment-related provisions of Section 504 of the Rehabilitation Act. Section 504 covers organizations and entities that receive federal financial assistance from DOL. CRC also enforces Title II of the ADA as that title applies to the labor- and workforce-related practices of state and local governments and other public entities. Finally, CRC enforces Section 188 of the Workforce Investment Act of 1998 (WIA), which bars disability-based discrimination by programs and activities that are part of the One-Stop employment and training system established by WIA Title I. See the Laws & Regulations subtopic for specific information on these laws.

The Equal Employment Opportunity Commission (EEOC) enforces ADA regulations covering employment.

DOL Web Pages on This Topic

- Business Focus
  Provides links to information on hiring and employing people with disabilities.

- Recruiting and Hiring Practices
  Provides links to information on how to find qualified applicants with disabilities and comply with laws prohibiting discrimination against people with disabilities in the workplace.

- Job Accommodation Network (JAN)
  JAN is a free consulting service that provides information about job accommodations, the ADA, and the employability of people with disabilities.

- JAN's Web Portal for Employers
  Information for employers about accommodation, legal issues, and human resources issues.

- Business Leadership Network
  The Business Leadership Network is a national program led by employers in concert with state Governors' Committees and/or other community agencies that engage the leadership and participation of companies throughout the United States to hire qualified job candidates with disabilities.
Interviewing Candidates with Disabilities from ASKEARN.ORG

Job interviews play a critical role in the hiring process, allowing employers the opportunity to identify the individual who possesses the best mix of knowledge, skills and abilities for the position available. When interviewing a candidate with a disability, some employers find themselves nervous about how to act or uncertain about how to act and what they can ask. Below is guidance on navigating the interview process with candidates with disabilities.

Preparing for the Interview

Before ever conducting an interview, it is important to ensure that your organization’s processes provide for equal job opportunities for applicants with disabilities:

1. Ensure that your company’s application and interviewing procedures comply with the Americans with Disabilities Act (ADA) which prohibits asking disability-related questions before a job offer is made.

2. Check that application forms, employment offices and interviewing locations are accessible to persons with a variety of disabilities.

3. Inform applicants ahead of time if they will be required to take a test to demonstrate their ability to perform actual or simulated tasks. This allows applicants the time and opportunity to request a reasonable accommodation, such as a different format for a written test, if necessary. (Such tests are permitted under the ADA as long as they are uniformly given to all applicants.)

4. Provide the opportunity for all applicants to request reasonable accommodations to enable them to participate in the interview and be prepared to respond to these requests. This should involve explaining the interview process ahead of time to allow applicants the opportunity to identify their needs. For example:
   - Applicants with visual impairments may request assistance in completing paper forms
   - Applicants that are deaf may request a sign language interpreter to facilitate communication
   - Applicants with cognitive impairments may request specific instructions on portions of the interview process in advance

Conducting the Interview

Conducting an interview with a candidate with a disability is essentially the same as it is with any candidate. Below are some tips for interviewing candidates with disabilities:

- Relax and make the applicant feel relaxed. If the applicant has a visible disability or reveals a disability during the interview, concentrate on the job qualifications and not the disability.
- Treat the individual with the same respect you would afford any other candidate.
- Hold individuals with disabilities to the same standards as all applicants.
- Ask only job-related questions that are relevant to the functions of the job for which the applicant is applying.
- Concentrate on the applicant's technical and professional knowledge, skills, abilities, experiences and interests.
- Do not try to imagine how you would perform a specific job if you had the applicant's disability. He or she has mastered alternate ways of living and working. If the applicant has a known disability, either because it is obvious or was revealed, you may ask him or her to describe how he or she would perform the job.
- Do not conduct an employment test unless all employees in the same job category need to take one.
- **DO NOT** request a medical examination prior to making a job offer (these are prohibited under the ADA). If, however, all employees entering similar jobs are also required to have a medical examination as a condition of hire, it is allowable to require individuals with disabilities to have an exam. If, after the medical examination, the employer decides not to hire an individual because of a disability, the employer must simply demonstrate that this decision is related to the job functions and is consistent with business necessity.

When interviewing, employers should adhere to the same **disability etiquette** as in other interactions with people with disabilities. Below are some basic do's and don'ts for keeping a job interview focused on the applicants' qualifications:

<table>
<thead>
<tr>
<th>DON'T:</th>
<th>DO:</th>
</tr>
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<tbody>
<tr>
<td>Ask questions about the disability</td>
<td>Ask job-related questions:</td>
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<tr>
<td>- What happened to you?</td>
<td>- How would you perform this particular task?</td>
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<tr>
<td>- How will you get to work?</td>
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<tr>
<td>- What sort of treatment do you need?</td>
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<tr>
<td>Ask questions framed in terms of the disability:</td>
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<tr>
<td>- Do you have a mental condition that would preclude you from qualifying for this position?</td>
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<tr>
<td>Ask about the amount or type of leave they expect to take to get treatment for their condition.</td>
<td>State the organization's attendance requirements and ask if the applicant can meet them.</td>
</tr>
<tr>
<td>Focus on the candidate's disability.</td>
<td>Focus whether the candidate is qualified for the job.</td>
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<tr>
<td>Ask about accommodations:</td>
<td>Wait until the candidate requests or mentions an accommodation before discussing this topic (it is the candidate's responsibility to make the request for accommodation).</td>
</tr>
<tr>
<td>- Will you need accommodations?</td>
<td></td>
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<tr>
<td>- What kind of accommodations will you need?</td>
<td></td>
</tr>
</tbody>
</table>