

Pomona College Academic Procedures Committee

c/o Pomona College Registrar's Office, Alex 110

909-621-8147 (phone) 909-621-8671 (fax)

Request for Information – Monsour Counseling Center

The student named below has presented a petition to the Academic Procedures Committee of Pomona College. Answers to the following questions are necessary for petitions based on experience of or treatment for psychological difficulties or conditions; additional information that is relevant should be appended.

You may complete this form on your computer and email it to registrar@pomona.edu; or complete it in hard-copy format and fax to 909-621-8671. We appreciate your prompt reply.

STUDENT NAME: _____

1. When did the student first seek the services of Monsour Counseling Center for this problem, and what was the nature of the condition reported? _____

2. How many times have you seen the student? _____ When did you last see the student prior to this request? _____

3. In your view, does the student's situation or condition create a disability for performing academic work? _____

4. Did you specifically advise the student to avoid activities that would realistically limit his or her academic work? _____

5. For students who have no history of treatment prior to the one visit, did you refer the student to a psychologist or psychiatrist for evaluation, medication, or hospitalization? _____

Signature Date Title
Email address Phone _____

May we call you? Y / N Best time to call _____

I authorize the Monsour Counseling Center to release information to the Academic Procedures Committee of Pomona College relating to the above questions.

STUDENT NAME: _____ DATE: _____

STUDENT SIGNATURE: _____