





## Functional Abilities Signature Statement

Northwood Technical College has developed a set of objective functional ability criteria for this program. By signing below, I am confirming that I have read and understand the bulleted information below and the information contained in this Functional Abilities Disclosure and that I am:

- Able to meet the Functional Abilities Criteria as presented with or without accommodation.
- Will be provided with information concerning accommodations or special services upon request.

*(This signed document is needed only for those students who did not complete the online application or requested additional information.)*

Signature: \_\_\_\_\_

Student ID: \_\_\_\_\_

Program: \_\_\_\_\_

Date: \_\_\_\_\_