

Alternate Media Agreement

Revised Date: 2.13.23

Submission Instructions

Once you have completed this form in its entirety, please print, sign, or e-sign, and submit it to the Office of Student Access and Wellness. Tel: 866.974.5700 Ext. 20050 • access@uagc.edu

Student Information	
Student Name:	Student ID:
Student Agreement	
I,impacts my ability to access print media and agree a student of the University of Arizona Global Campu	, verify that I have a disability which to the following terms and conditions regarding alternate media use as us:
I have a disability that prevents me from using to format.	exts in print, and therefore, I request receipt of my texts in an alternate
☐ I will not use, further distribute, or copy these alt	ernate media files for any other purpose.
☐ I will abide by the Copyright Law of the United S applicable Student Community Standards of the	states of America, as amended (17 U.S.C Sec 101 et seq.), and the University of Arizona Global Campus.
☐ I understand the publisher owns all rights to the only have the right to use the alternate media fo	works and the alternate media files for the works, including copyright, r the purposes set forth in this request.
☐ I understand that Course Digital Material Fees w	vill be assessed within my student account.
☐ I agree to contact my Access and Wellness Coul which alternate media is requested.	nselor at least 2 weeks in advance of the start date of each course for
Student Consent	
I verify that the aforementioned information is compl receiving alternate media items, I am agreeing to abi	ete, true and correct, and by electronically signing this form and ide by these terms.
Student Signature	Date [,]