



**PERSONAL ATTENDANT FORM  
TO BE REVIEWED AND SIGNED BY THE UNC CHARLOTTE STUDENT**

**Student Name:** \_\_\_\_\_ **UNC Charlotte ID:** \_\_\_\_\_ **Email:** \_\_\_\_\_

I, the above named student have provided documentation that I require a personal attendant to accommodate my disability while I attend UNC Charlotte. The following necessary information regarding my personal attendant which is hereby provided and which I agree to provide to the University, when possible, prior to any change, and no later than within twenty-four (24) hours of any change. **The Attendant or their agency may assist in providing the information.**

**Attendant's name (First, Middle, Last):** \_\_\_\_\_

**Date of birth (MM/DD/YYYY):** \_\_\_\_\_

**Attendant's telephone number & email address:** \_\_\_\_\_  
Telephone Number Email Address

**Attendant's address (No PO Box):** \_\_\_\_\_

**Agency providing attendant, if applicable:** \_\_\_\_\_

**Agency address & telephone number, if applicable:** \_\_\_\_\_

**Attendant's driver's license information:** \_\_\_\_\_  
State Number

**Attendant's vehicle information:** \_\_\_\_\_  
Make Model Year Color

**Attendant's vehicle registration information:** \_\_\_\_\_  
State Tag Number

**Has the attendant ever had a UNC Charlotte ID number? If yes, indicate number:** \_\_\_\_\_

**\*\*I understand that background check information and a scanned copy of my attendant's driver's license must also be provided to the Office of Accessibility and Accommodation\*\***

I hereby certify that either I or the company with which I have contracted to provide me with a personal attendant have carefully reviewed the personal attendant's background information, including an adequate criminal background check and have determined that the attendant is not a possible risk to the safety of the students, employees, or the property of the University. I will promptly notify the University if the personal attendant is charged with **any** crime of violence (including stalking or communicating threats), theft, drug possession, assault or arson, or any other crime that would create a concern of safety by a reasonable person.

I realize that all personal attendants are expected to follow all applicable University policies, regulations, rules and procedures. Further, personal attendants are not allowed to participate in or interfere with classroom activities or discussions, or in any way disrupt the classroom or instructor. If a personal attendant fails to abide by such policies, regulations, rules, and procedures and/or causes a fundamental alteration in services, programs, or activities, then the Office of Accessibility and Accommodation or other University representative may make a determination that the personal attendant will not be allowed to accompany the student with a disability in the classroom, and/or other University sites. If a personal attendant who resides in University housing fails to abide by the Contract for Residential Services signed by me and the policies, regulations, rules and procedures related to housing, Housing and Residence Life may make a determination that the personal attendant will not be allowed to live with me in University housing or have access to University housing. It is my responsibility to secure the services of another personal attendant in the event a personal attendant becomes unable to perform services for me or if the University makes a determination that the personal attendant is not allowed access to some or all of the University's campus.

I accept full responsibility and agree to hold harmless, defend and indemnify the University, its employees and representatives, for the content of any lecture or for any information that my attendant may receive while acting as my attendant.

In the event of a dispute relating to the use of a personal attendant, I agree to follow the Student Grievance Procedures.

**Student's Signature:** \_\_\_\_\_ **Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**INCOMPLETE FORMS WILL NOT BE PROCESSED**