Nevada Physical Therapy Board

3291 North Buffalo Drive, Suite 100 · Las Vegas, NV 89129 Phone
(702) 876-5535 · Facsimile (702) 876-2097

NATIONAL PHYSICAL THERAPY EXAM ACCOMMODATIONS REQUEST FORM

Exam applicants with disabilities covered by the Americans with Disabilities Act may request testing accommodations for the National Physical Therapy Examination. To be granted accommodation, the applicant must submit a completed Request Form and supporting documentation, prior to testing. The information provided regarding the disability and the need for accommodation in testing will be treated with strict confidentiality. The Board will review your request and let you know if any additional information is required.

Step 1. Applicant Information

I hereby request special accommodation for taking the National Physical Therapy Examination.

Applicant First Name: _____ Last Name: _____

Application #: _____ Phone #: _____

I attest to the fact that the information recorded on this form is true, and I agree to provide the Board with any additional information or documentation requested, to evaluate my request for accommodation(s).

Candidate's Signature: _____ Date: _____

Step 2. **Indicate the testing accommodation(s) you are requesting.**
(Check all that apply)

- ☐ Additional Time
  - ○ Extended Time: Standard Time + 50% (Time and a half)
  - ○ Extended Time: Standard Time + 100% (Double time)
  - ○ Additional 30 minutes
- ☐ Separate Testing Room
- ☐ Scribe*
- ☐ Reader*
- ☐ Zoom Text or a screen magnifier
- ☐ Other (specify):

*Note: *These accommodations are automatically approved with a private room to prevent distractions to other test-takers. Please note that a scribe and/or reader are only approved in circumstances where the applicant is unable to read or write independently, even with extra time.*

Step 3.

Provide a specific rationale for each accommodation you are requesting. You may also write a personal statement and attach it to your request.

Accommodation requested: _____

Rationale:

Accommodation requested: _____

Rationale: _____

Accommodation requested: _____
Rationale:_____

Accommodation requested: _____

Rationale:

Accommodation requested: _____

Rationale:

Step 4. **Documentation.**

Documentation is current if it can reasonably be expected to illustrate how you will be functioning on test day, and how your limitations may be hindered by specific barriers on the test.

We do not require diagnosis for accommodation, but you can submit diagnosis as your documentation.

Other options you can submit include but are not limited to:

• Documentation from a school or university outlining the accommodation you received during your education.

• Documentation of accommodations received for another standardized test (for example the GRE, SAT, etc.).

• Personal statement describing the formal or informal accommodation you received.

Step 5. **Submit completed form and documentation.** Requests for testing accommodation may be submitted via email or mail. Be sure to include the appropriate documents with your submission. An incomplete request form will cause a delay in processing your request.

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If you have questions regarding the accommodations request process, please contact the Board office at (702) 876-5535.