



STUDENT ACCESSIBILITY CENTER

Sullivan Center, Suite 117
6339 N. Sheridan Road | Chicago, Illinois 60660 Phone:
(773) 508-3700 | Fax: (773) 508-3810
SACNoteTaking@LUC.edu

Audio Note Taker Activation Form

This form is to be used only by students:

- who are **currently registered** with Student Accessibility Center
- who are **currently approved** for the Audio Note Taker accommodations

Faculty must sign this form to acknowledge your use of a recording device in class. Please return it to SAC as soon as possible in order to gain full access to the Audio Note Taker Program. **If you have any questions or would like additional help with using the program**, please contact SACNoteTaking@luc.edu.

Name: _____ Loyola ID #: 0000 _____
(First) (Last)

Email Address: _____@luc.edu Date: _____

Recorded Lecture Policy Agreement

Students with disabilities who are unable to take or read notes have the right to record class lectures and/or receive lecture notes/slides for their personal study only.* This accommodation provides equal access to students with disabilities. Lectures/slides for this purpose may not be shared with other people without the consent of the lecturer. Recorded lectures/slides may not be used in any way against the faculty member, other lecturers, or students whose classroom comments are recorded as part of the class activity. Information contained in the recorded lecture/slides is protected under federal copyright laws and may not be published or quoted without the express consent of the lecturer and without giving proper identity and credit to the lecturer. Recordings should be deleted at the end of the semester. Faculty should contact SAC with any questions.

Professor Pledge

I understand that this student will be recording lectures/provided slides as an ADA accommodation for personal use in accordance with state laws/regulations.

COURSE	Professor Name (print)	Professor Signature/Date

Student Pledge: I have read and understand the above policy on recorded lectures at Loyola University Chicago, and I pledge to abide by the above policy with regard to any lectures I record or slides I receive while enrolled as a student at Loyola University Chicago.

Student Signature: _____ Date _____

*84.44 of Section 504 of the Rehabilitation Act of 1973 (P.L. 93-112, amended P.L. 93-156).