

University of Alaska Southeast
NOTETAKER PAYMENT VERIFICATION FORM

Directions: This form must be signed by both the notetaker and the student for whom notes are being provided. Submit this form to **Disability Support Services two weeks prior to the end of the class.**

I verify that notes were provided by:
(please print)

I verify that notes were received by:
(please print)

Signature of **notetaker**

Signature of **DSS student**

Date Phone #

Date Phone #

Course: _____ Section: _____ Number of credits: _____

Notes have been provided for (circle A or B):

A. The entire semester B. Other (please specify) _____

**PLEASE RETURN THIS FORM TO
DISABILITY SUPPORT SERVICES (DSS)**

(two weeks prior to the end of the class.)

THANK YOU!

If you have any questions about services, or your rights and responsibilities under this agreement, please contact Susan Wylie, LPC Counseling and Disabilities Support Services: (907) 796-6514.