

**Request for Modification in the Administration
of the Uniform CPA Examination**

The Idaho State Board of Accountancy complies with the Americans with Disabilities Act. To ensure equal opportunity for all qualified persons, the Board will make reasonable accommodations for candidates having disabilities that might affect their taking the licensing examination.

Please provide the following information and return this form to the Board.

What is the disability that limits one or more of your major life activities (e.g., walking, hearing, speaking, seeing, reading, or writing)?

Will this disability require special accommodations in order for you to take the Uniform CPA Examination? If yes, describe the special accommodations needed. Use a separate sheet of paper if more space is needed.

Affidavit from Candidate Agreeing to Modifications:

Provide the Board with written documentation from an appropriate health care professional supporting the accommodations you request at the time of your application. The documentation must include a diagnosis of your disability and a specific recommendation and justification for the testing accommodations you require. The Board will not pay any cost you incur in obtaining the required diagnosis and recommendation. However, it will pay for any reasonable accommodations that are provided for you.

**IF YOU DO NOT REQUIRE MODIFICATION,
IT IS NOT NECESSARY TO RETURN THIS FORM.**

If you have any questions, please call the Board office at 208-334-3584.

Name (Please Print) _____ Social Security Number _____

Signature _____ Date _____

If you have a disability that requires any special materials, services or assistance, please contact the Board office by the application deadline so we may arrange for appropriate accommodations.

Any questions? Contact [Sandy Bly](#) at the Board office.

Revised February 2014