

MY PERSONAL PROFILE AND ACCOMMODATIONS PLAN

Date

Dear

My name is I am years old.

I enjoy

I am currently

I have a hearing loss in

I use to communicate

with others. My hearing loss is in the range. It is a

loss. I have had my hearing loss for

In order to help me hear and communicate better, I use

Although this technology helps, it does not make listening and understanding perfect. There are certain

situations in which it is more difficult to hear. These may include:

- Telephone
- Cell phone
- One on one conversation
- Group situations
- Small group meetings
- Large group meetings
- Restaurant
- Automobile
- Understanding individuals who have an accent
- In poorly lit areas (darkened rooms for presentations, movies)
- Fire alarm
- Public Address Announcements
- Computer
- Radio
- Large classroom/lecture halls
- Small classroom/lecture halls
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To help in these situations, I use hearing assistive technology; specifically

Insert those that you use or any other technology:
a personal FM system
a special telephone
captioning
visual alerting devices (fire alarm, doorbell)
Other _____

In addition to the various technologies and services that help me, I benefit from the following accommodations:

Insert those that you use and add any others that you use:

- *Get my attention before starting to speak*
- *Face me when you speak and do not cover your mouth*
- *Try to be within about 6 feet of me when you speak*
- *Turn off radios, TV or other sources of noise*
- *Keep the lights on so that I can read lips*
- *If we are in a group, it is helpful if one person speaks at a time*
- *If we are in a group, it is helpful if we move to a quiet room/location*
- *If we are in a group, it is helpful to be seated at a round table*
- *I may need repetition or rephrasing when people are talking*
- *I need a sign language interpreter*
- *Write important information down; I cannot speechread and take notes at the same time*
- *Other* _____

Thank you for your time. I look forward to learning and working with you. If you have any additional questions about my hearing loss, hearing assistive technology, or accommodations, I would be happy to provide you with more information.

Sincerely

Insert *your name*
Insert *preferred contact information*