

Disabilities & Dyslexia Service
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Guidance for GPs and health professionals writing letters for students to support an application for:

- University support adjustments.
- Disabled Students' Allowance (DSA).

The London Metropolitan University Disabilities and Dyslexia Service (DDS) offers advice, information and support for students who have a disability, a Specific Learning Difficulty (SpLD) such as Dyslexia or Dyspraxia, students who are deaf or hard of hearing, blind or partially sighted students, students with chronic long-term health conditions and students with mental health difficulties.

In order to help tailor University support to individual student need we ask that students provide medical documentation as per the requirements noted below. Such documentation is also required in support of applications for the Disabled Students' Allowance (DSA).

DSA funding eligibility decisions rest with the student's funding body and it can take up to 12 weeks for applications to be processed. To help avoid delays with regard to students accessing support, and to enable DDS to create a bespoke University support package we ask that letters provided by GPs or other healthcare professionals:

- State a diagnosis for all conditions.
- Be dated and signed on headed paper with the identity and position of the author noted (e.g. GP). Please print and sign your name.
- Indicate whether the condition/s is acute or chronic. In the case of chronic conditions please
 indicate if the condition has lasted 12 months or more, or can reasonably be expected to
 last 12 months or more.
- Indicate the anticipated day-to-day impact of the condition/s.
- If possible include comment upon the likely impact to study activity. e.g. does the condition/s impact upon the student's:
 - Concentration / motivation?
 - Sleep / energy levels?
 - Time-management / self-direction?
 - Short and / or long-term memory?
 - Communication?
 - Social interaction e.g. would group work be a source of anxiety?
 - Ability to travel on public transport?
- Indicate any variation or fluctuation in the condition/s, including any known triggers.
- Provide details concerning any treatment, including the side effects of any medication.

Thank you for reviewing this document. Please contact us if you have any questions or queries.