Request Form – Adjustments for Students with Specific Needs

This form is designed to gather the information required to process your request by the specific needs referent at your school.

All information provided will be treated confidentially.

HEAD – Haute école d'art et de design	
Type of program *	
☐Bachelor ☐Master ☐Long Life Learning / Continuing training	
Field of study *	
Bachelor ☐Fine arts ☐Cinema ☐Interior Architecture ☐Visual communication ☐Illustration ☐Fashion Design ☐Product Design – Jewellery and Accessory	**Master** ☐Fine arts – CCC ☐Fine arts - TRANSform ☐Fine arts – Work.Master ☐Cinema ☐Fashion and Accessory Design ☐Design Installation ☐Media Design ☐Interior Architecture ☐Visual Knowledge
Type of applicant *	
☐Candidate ☐Enrolled student ☐Auditor ☐Other	
Last Name *	
First Name *	
Date of Birth *	
Contact e-mail *	

Hes·so GENÈVE
Haute Ecole Spécialisée de Suisse occidentale

Is this your first adjustment request? *
☐Yes ☐No
Which health condition(s) are you requesting adjustment for? *
How does your health affect your daily studies? *
Which adjustment do you need for admission competitive examination? *
Which adjustment do you need for your coursework? *
Which adjustment do you need for exams?
Written exams *
Oral exams *

Other
General comments or remarks you wish to share
If needed, do you authorize us to forward your file to the medical advisors of HES-SO Genève for review? *
☐Yes ☐No

The completed form must be sent by email to the referent for specific needs of your school (besoins-specifiques.head@hesge.ch), together with documentation from your healthcare provider confirming your specific needs (as per the requirements set out at https://www.hesge.ch/en/student-life/student-services/specific-needs, long with any other documents you deem relevant.