ST. JOHN VIANNEY THEOLOGICAL SEMINARY
ARCHDIOCESE OF DENVER

Academic Accommodations Policy

(promulgated in 2025)

1. Clarity of Terms

Learning Disorder (Disability)[1]: A learning disorder is a neurological disorder that affects one or more of the basic mental processes involved in understanding or in using spoken or written language. The disorder may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. "Learning Disabilities" is an umbrella term describing a number of other, more specific learning disorders, such as dyslexia and dysgraphia (now termed specific learning disorder with impairment in reading or written expression).

[1] *Learning Disorder* (DSM-5 proposed definition): (A.) A group of disorders characterized by difficulties in learning basic academic skills (currently or by history), that are not consistent with the person's chronological age, educational opportunities, or intellectual abilities. Basic academic skills refer to accurate and fluent reading, writing, and arithmetic. Multiple sources of information are to be used to assess learning, one of which must be an individually administered, culturally appropriate, and psychometrically sound standardized measure of academic achievement. (B.) The disturbance in criterion A, without accommodations, significantly interferes with academic achievement or activities of daily living that require these academic skills. Types of learning disorders: Reading, Written Expression, and Mathematics (there are others, but these are the most prominent).

WASI-II is recommended for all seminary candidates and full WAIS-IV on either all applicants or those who have less than a college degree and/or academic performance below a particular point (recommendation 3.5 cut-off). Coding subtests low scores would indicate broad writing and/or comprehension deficit. Symbol search along with other markers (low scores on WJ Achievement Group C test 1 and Group E test 6) there is likely a visual processing deficit that may present as dyslexia.

WJ-Achievement battery is an efficient instrument often used to screen for LD. Poor performance on any of the group A tests signals a LD concern. Poor performance on the Math fluency test will sometimes signal a broader problem in executive functioning. A low score on Group A test 1, 2, and 13 is highly suggestive of dyslexia; Group B test 17 suggests a broad comprehension or memory deficit (student would struggle in philosophy or theology).

Diagnosis of a learning disorder is normally conducted by a psychologist and involves intelligence and achievement testing, as well as tests of processing abilities and a review of sample written work (cf. *Americans with Disabilities Act* 2008).

Research shows that 8 to 10 percent of American children under18 years of age have some type of learning disability.

a.) Every individual with a learning disorder is unique and shows a different combination and degree of difficulties. A common characteristic among people with learning disorders is uneven areas of ability, "a weakness within a sea of strengths." For instance, a person with dyslexia who struggles with reading, writing and spelling may be very capable in math and science.

b.) Learning Disorders should not be confused with learning deficits (reading and writing) which are primarily the result of poor education or visual, hearing, or motor handicaps; of intellectual disability; of emotional disturbance (anxiety, depression); or of environmental, cultural or economic disadvantages.

c.) In general, people with learning disorders are of average or above average intelligence. There often appears to be a gap between the individual's potential and actual achievement. This is why learning disorders are referred to as "hidden disabilities:" the person looks perfectly "normal" and seems to be a very bright and intelligent person yet may be unable to demonstrate the skill level expected from someone of a similar age.

d.) A learning disorder cannot be cured or fixed; it is a lifelong challenge. However, with appropriate support and intervention, people with learning disorders can achieve success in school, at work, in relationships, and in the community.

ADHD/ADD (Attention Deficit or Hyperactivity Disorder): It is important to note that ADD is not a learning disorder but is a mental health diagnosis. It is a chronic biobehavioral disorder that initially manifests in childhood and is characterized by hyperactivity, impulsivity, and/or inattention (ADD). Not all those affected by ADHD manifest all three behavioral categories. These symptoms can lead to difficulty in academic, emotional, and social functioning. The diagnosis is established by satisfying specific criteria and may be associated with other neurological, significant behavioral, and/or developmental/learning disabilities. Therapy may consider the use of medication, behavioral therapy, executive functioning coaching, and adjustments in day-to-day lifestyle activities. Studies in the United States indicates approximately 8 to 10 percent of children satisfy diagnostic criteria for ADHD.

Three subtypes of ADHD/ADD are described: (1) predominantly inattentive, (2) predominantly hyperactive and impulsive, and (3) combined. While previously believed to be "outgrown" by adulthood, current opinion indicates that many children will continue throughout life with symptoms that may affect both occupational and social functioning. Some medical researchers note that approximately 40 to 50 percent of ADHD-hyperactive children will have (typically non-hyperactive) symptoms persist into adulthood.

2. Mental Health Conditions that can affect Learning: Other mental health conditions that can affect learning may include depression, anxiety, and other possible cognitive/processing impairments, etc. A student who has learning problems (poor reading/writing) as a result of poor educational training should not be classified as learning disabled.

3. English as Second Language (ESL): ESL detection and intervention is for a student who is non-native English speaker and needs help gaining fluency in English. The seminary Course Catalog specifies the evidence of language proficiency required for all international students (e.g., TOEFL, IELTS, etc.), enabling them to accomplish coursework at university-level. ESL is not considered a Learning Disorder and will not be addressed in this policy.

4. Detection of Learning Disorders, ADHD, and other Mental Health Conditions that can affect Learning:

a.) Learning disorders or other mental health conditions that affect learning ought to be identified through the initial application process either by the candidate/family history or through the recommended psychological evaluation conducted by each diocese.

b.) If a professional diagnosis and treatment plan have previously been established, the candidate ought to provide corresponding reports/recommendations/prognosis and progress to date to the admissions committee as part of his application process.

c.) The Admissions Committee of the diocese and/or seminary ought to determine if further testing is warranted and/or desired in light of that candidate's overall assessment. If so requested, then further assessment detailing the nature and scope of the candidates' learning disorder ought to be undertaken by an appropriately trained psychologist detailing a specific treatment plan for addressing the individual's difficulties.

d.) The SJV staff Psychologist (with an individual release from the seminarian) will be available to review evaluations conducted by the evaluating Psychologist. Indication of previously diagnosed learning disorders or suspected mental health conditions that affect learning can then be discussed with the student to evaluate the necessary interventions. If additional clarification is needed after acceptance, further testing will be recommended by the SJV staff Psychologist and will be the responsibility of the sending diocese to coordinate.

5. Interventions and Progress Monitoring for Learning Disorders, ADHD, and other Mental Health Conditions that can affect Learning: The seminarian is responsible for informing the Academic Dean and the SJV staff Psychologist if he suffers from some type of learning disability that may affect his academic performance. Accommodations will be made for seminarians with learning disabilities or who have a special need.

a.) Individual treatment plans and recommended referrals for professional intensive intervention (as needed) for learning disorders, ADHD/ADD, and other Mental Health conditions ought to be coordinated and monitored by the SJV staff Psychologist.

b.) The SJV staff Psychologist will be the contact person between the seminarian and the referral.

c.) Individual costs for diagnosis and intervention ought to be covered by the seminarian's home diocese.

d.) If the seminarian requires modification in the academic program due to his learning disorder or other diagnosis, he will present to the Academic Dean at the beginning of the academic year a copy of the formal diagnosis of a current disability (academic, medical, or psychological), recommendations and verifications outlining the request for accommodations (test accommodations; alternate formats for texts, e.g. audio books/e-readers, pre-course background materials, lecture outlines to guide note-taking, etc.). If not supplied, the date of diagnosis, credentials of the diagnosing professional, the impact of a disability on a major life activity and/or information on the impact to academic performance may be requested.

> i.) The Academic Dean, not the SJV staff psychologist, is responsible for keeping all academic records related to the seminarian's learning disorder, such as keeping a record of the copy of the recommendations and verifications outlining the request for accommodations that was presented by the seminarian.
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> ii.) The Academic Dean is responsible for ensuring confidentiality of the records and information provided by the seminarian concerning his learning disability.
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> iii.) The seminarian is responsible for providing the Academic Dean with up-to-date documentation of his learning disability.
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> iv.) The Academic Dean will present in writing the recommended accommodations to the seminarian, his Formator and his Academic Advisor. The Academic Dean will share only what directly affects the academic dimension of the problem. Recommended accommodations will also be available to the course Instructor and Academic Advisor on the seminarian's online *Populi* profile.

e.) If the seminarian requires accommodations for a particular course, the seminarian should inform the Instructor for the course during the first week of class and present a copy of the letter from the Academic Dean outlining the accommodations. The seminarian needs to share only what directly affects the academic dimension of the problem. The seminarian and the course Instructor should then work out any accommodations together. The seminarian should remind the course Instructor in a timely manner of academic accommodations agreed upon for tests and assignments.

f.) Course Instructors are asked to honor the recommendations necessary to assist the seminarian and provide "reasonable and appropriate accommodations" without compromising the quality of the academic program. The course Instructor may consult with the Academic Dean if the Instructor has any questions about the seminarian's request for accommodations or any proposed recommendations.

g.) Following intensive interventions, it is recommended that ongoing targeted intervention, as needed, be implemented to monitor the progress and aid the student's academic growth.

h.) Course Instructors are encouraged to also monitor the progress of students' learning styles based on the recommended accommodations so they can be adjusted to the needs of the seminarian as warranted.

6. Seminarians who struggle with Learning Disorders, ADHD, and other Mental Health Conditions that can affect learning, who have escaped initial detection:

a.) If a course Instructor, based on the concrete results of the academic performance of a seminarian, such as failing grades, incongruent writing, incapacity of focusing during class, realizes that a student may have learning disability, he or she will report it to the Academic Dean and the seminarian's Formators and Academic Advisors.

b.) The Academic Dean, Formators, and Academic Advisors will investigate if the source of the problem is a learning disorder, or lack of studiousness and method. If needed, they may require the student be tested for learning disorder, in coordination with the staff Psychologist.

c.) If a course Instructor, based on the concrete results of the academic performance of a seminarian, such as a lack of grammar base, syntax, spelling, lack of knowledge of English, etc., realizes that the student needs help, he or she will report it to the Academic Dean and the seminarian's Formators and Academic Advisors. If a learning disorder is ruled out by the staff Psychologist, the Academic Dean/Advisor/Formator can address the issue by referring the seminarian to some remedial work in the areas of English skills, methodology of study or ESL. Seminarians with writing difficulties should be referred to the writing tutor as appropriate.

d.) Academic faculty members are invited to share their concerns regarding students, not only in academic performance, but of a human or spiritual nature as well. Faculty members are especially invited to report on anything that may be considered important to be aware of prior to the seminarian's final evaluation.

Flowchart for Accommodations (cf. n. 5)

1.) The **seminarian** is responsible for informing the **Academic Dean** and the **SJV staff Psychologist** if he suffers from some type of learning disability that may affect his academic performance. Accommodations will be made for seminarians with learning disabilities or who have a special need.

2.) If the **seminarian** requires modification in the academic program due to his learning disorder or other diagnosis, he will present to the **Academic Dean** at the beginning of the academic year a copy of the formal diagnosis of a current disability, recommendations and verifications outlining the request for accommodations.

3.) The **seminarian** is responsible for providing the **Academic Dean** with up-to-date documentation of his learning disability.

4.) The **Academic Dean** will present in writing the recommended accommodations to the **seminarian**, his **Formator** and his **Academic Advisor**. The Academic Dean will share only what directly affects the academic dimension of the problem. Recommended accommodations will also be available to the course Instructor and Academic Advisor on the seminarian's online ***Populi*** profile.

5.) If the **seminarian** requires accommodations for a particular course, the seminarian should inform the **Instructor** for the course during the first week of class and present a copy of the letter from the Academic Dean outlining the accommodations. The seminarian needs to share only what directly affects the academic dimension of the problem. The seminarian and the course Instructor should then work out any accommodations together. The seminarian should remind the course Instructor in a timely manner of academic accommodations agreed upon for tests and assignments.

6.) The course **Instructor** may consult with the **Academic Dean** if the Instructor has any questions about the seminarian's request for accommodations or any proposed recommendations.

7.) Course **Instructors** are encouraged to also monitor the progress of students' learning styles based on the recommended accommodations so they can be adjusted to the needs of the seminarian as warranted.