

## IEP/504 ACCOMMODATION REQUEST Colorado All State Choir 2025-2026

Student Name: Director Name:					
School:					
Audition Site: METRO	NORTHERN	SOUTHERN	WESTERN	(please circle)	
Accommodation(s) Request classroom and must be indicated on the	-		•	-	
We, the parents of view the accommodation she made during their All State C shared with the All State Cho Accommodation documental completion of the festival.	eet from our s hoir audition. ir's Administr	tudent's IEP/5 We understar ative Assistant	04 in order onder the the control of	for appropriate acco accommodation she Id Judge and Site Sch	mmodations to be et will only be eduling Governor.
Student Signature	Date	<u> </u>	Parent	t Signature	Date
Director Signature	Date	e			

ACCOMMODATION REQUEST FORMS AND IEP SNAPSHOTS SHOULD BE UPLOADED DIRECTLY INTO YOUR DIGITAL REGISTRATION FORM AT THE TIME OF REGISTRATION

You will receive an email confirming that your accommodation form has been received and accommodations have been granted before audition schedules are posted online. Requests for accommodations will be granted by the Head Judge and the All State Choir Chair as dictated on the student's IEP/504 Accommodation Sheet.

If you have any questions or concerns regarding accommodations, feel free to contact Sarah Branton, All State Choir Chair, at *sharrison.aschoir@gmail.com*.

It is your job as a director to advocate for your student both before auditions and during their audition. Please adhere to all deadlines so that the appropriate accommodations can be made BEFORE the student arrives to audition.