

# NAVLE<sup>®</sup> ACCOMMODATION REQUEST PACKET

## OVERVIEW

The International Council for Veterinary Assessment (ICVA<sup>®</sup>) administers the North American Veterinary Licensing Examination (NAVLE<sup>®</sup>), which is a requirement for licensure to practice veterinary medicine in all United States and Canada licensing jurisdictions. The ICVA administers the NAVLE in three (3) testing windows annually in:

OCTOBER – NOVEMBER	MARCH	JULY – AUGUST
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The ICVA is committed to complying with the principles of the Americans with Disabilities Act (ADA) by providing equal exam access to all candidates. NAVLE candidates with documented disabilities as defined by the ADA must review and complete this Accommodation Request Packet for consideration of testing accommodations through any U.S. state or territorial licensing board. Candidates applying in Canada should contact the [Canadian National Examining Board \(NEB\)](#) for more information on the NEB accommodation process.

### Accommodations requests are considered by the ICVA only if you have:

- 1 already applied (or are applying) to take the NAVLE for a specific testing window;
- 2 indicated on your NAVLE application that you intend to request an accommodation by checking the applicable box on your exam application;
- 3 submitted a complete and fully supported Accommodation Request Form, and
- 4 responded completely and promptly to any requests from the ICVA to clarify, correct, and/or supplement your request.

**⚠ Note: You must indicate your intent to request an accommodation when completing the NAVLE application. If you fail to do so, and receive a Scheduling and Admissions Permit for standard-format testing, absent extraordinary circumstances, an accommodation within the same testing window will not be granted.**

## DEADLINES

Your completed and supported Accommodations Request Packet must be received no later than the dates listed below with the corresponding testing window. The deadlines below are fixed and do not change even if testing windows are expanded or extended, and requests are processed in the order in which they are received. It is recommended that you submit your completed and supported Accommodations Request Form as far in advance of the applicable deadline date as possible in case additional information is needed.

Once an accommodation request is approved, the accommodations apply to all of a candidate's NAVLE attempts, provided that the candidate indicates on their application they are requesting the same accommodations.\*

\* Please note that this is only valid for examinations taken through a US licensing board or with direct approval from the ICVA. If you plan to apply for the NAVLE during a future testing window through the Canadian NEB, you must apply for and obtain approval for NAVLE accommodations through the NEB's process intended for individuals planning to practice in Canada.

Testing Window	OCTOBER – NOVEMBER	MARCH	JULY – AUGUST
Deadline Date	No later than <b>July 15</b>	No later than <b>January 7</b>	No later than <b>May 7</b>

## BEST PRACTICES

Whenever possible, the ICVA will contact you in writing via e-mail to request additional information and documentation needed to decide and act on your request. Please be sure to keep copies of your submitted documentation since the Accommodation Request Form will not be returned after it is received by the ICVA.

### For more information, please review the remaining contents of this packet, which includes the following:

- 1 Request Process and Checklist
- 2 Guidelines for NAVLE Accommodation Requests
- 3 Accommodation Request Form

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## REQUEST PROCESS AND CHECKLIST

For accommodation consideration, you must complete the following steps:

- Review the [Guidelines for NAVLE Accommodations Requests](#), on page three (3).
- Complete, sign and date the [NAVLE Accommodation Request Form](#) found in this packet.
- Include the following required items with your NAVLE Accommodation Request Form:
  - A personal statement that:
    - 1** identifies the physical and/or mental impairment(s) that are the basis for your request for an accommodation;
    - 2** describes how the impairment(s) substantially limit a major life activity; and
    - 3** explains how standard NAVLE examination conditions are not sufficient and your requested testing accommodation is instead necessary.
  - If you are requesting an accommodation you **received in the past**, you must submit:
    - Proof that you previously received **that same accommodation** when taking a standardized test in the past and/or when taking academic exams at a public or private school, and
    - Certification from a qualified professional of current need for the requested accommodations due to a disability.
  - If you **have not previously received** a testing accommodation, or if you are **requesting a different accommodation than you received in the past**, you **must** submit complete and comprehensive documentation from a qualified professional that:
    - 1** identifies the specific diagnosis that you identify as a disability, and
    - 2** clearly and specifically explains, in detail, how the diagnosis affects both your:
      - a. major life activities, and
      - b. educational functioning.
- Ensure delivery of your NAVLE Accommodations Request Form by the deadlines below via one of the methods below:

Testing Window	OCTOBER – NOVEMBER	MARCH	JULY – AUGUST
Deadline Date	No later than <b>July 15</b>	No later than <b>January 7</b>	No later than <b>May 7</b>

- Email: [accommodations@icva.net](mailto:accommodations@icva.net)
- Upload: <https://www.icva.net/modules/dashboard/#application1>
- Fax: (701) 224-0435
- Respond completely and promptly to any requests from the ICVA to clarify, correct, and/or supplement your accommodation request, within the deadline identified by the ICVA.

# ICVA NAVLE® ACCOMMODATION REQUEST PACKET

## GUIDELINES FOR NAVLE ACCOMMODATIONS REQUESTS

The International Council for Veterinary Assessment (ICVA) complies with the Americans with Disabilities Act (ADA) and applicable state laws for the administration of the North American Veterinary Licensing Examination (NAVLE®). To this end, the ICVA considers requests for reasonable testing accommodations made by candidates with disabilities who have applied to take the NAVLE. The ICVA approves accommodations only to the extent necessary to ensure that the test score of a candidate with a disability accurately reflects the mastery of skills and attainment of knowledge measured by the NAVLE.

The following guidelines are designed to ensure appropriate consideration of requests for reasonable accommodation. These guidelines will be interpreted and implemented in accordance with the ADA and other applicable law. To the extent these guidelines differ from applicable law, the latter will control.

The ADA defines a person with a disability as “any person who

- A** has a physical or mental impairment which substantially limits one or more of such person’s major life activities,
- B** has a record of such impairment, or
- C** is regarded as having such an impairment.”

Individuals meeting this definition may be eligible for reasonable accommodations on the NAVLE.

Unless a disability is readily apparent, candidates requesting accommodations must provide, at their own expense, written documentation evidencing their disability and their current need for the requested accommodation. These materials may include, but are not limited to, the following:

Documentation of prior accommodations on similar exams	<ol style="list-style-type: none"> <li><b>1</b> Provides proof that a candidate previously received the same testing accommodation now requested for the NAVLE when taking a similar high-stakes exam, such as the GRE, MCAT, or SAT, and</li> <li><b>2</b> Certifies the candidate’s current need for the same testing accommodations due to a disability.</li> </ol>
Documentation of prior formal public-school accommodations	<ol style="list-style-type: none"> <li><b>1</b> Provides proof that the candidate received testing accommodations in the candidate’s most recent Individualized Education Program or Section 504 Plan, and</li> <li><b>2 (1)</b> Certifies the candidate’s current need for the requested testing accommodations due to disability.</li> </ol>
Documentation of prior formal private-school accommodations	<ol style="list-style-type: none"> <li><b>1</b> Shows a consistent history of the candidate having received testing accommodations for similar tests in a private-school setting, and</li> <li><b>2 (1)</b> Certifies the candidate’s current need for the requested testing accommodations due to disability.</li> </ol>
Documentation from a qualified professional with expertise in the disability for which an accommodation is requested	<p>The documentation must be legible (i.e., typewritten), signed, dated, and submitted on the professional’s letterhead. The documentation must establish the following:</p> <p>The professional</p> <ol style="list-style-type: none"> <li><b>1</b> is qualified to diagnose the underlying physical or mental impairment, and</li> </ol>

- 2 has in fact evaluated the candidate and diagnosed the candidate with the impairment (either initially or upon a re-evaluation).

The document must

- 1 state the specific accommodation requested by the candidate is needed in light of the diagnosed condition; and
- 2 explain how and why the requested accommodation is justified and necessitated by the candidate's disability.

A brief listing of the professional's qualifications (including degree, licensure, and areas of specialization) should be included either in the evaluation or in a separate written document. The documentation should be recent.

- » While the foregoing list identifies documentation ICVA typically requires to support an accommodation request, some other types of documentation also may be sufficient. Please contact [accommodations@icva.net](mailto:accommodations@icva.net) if you have any questions about alternate forms of documentation you would like ICVA to consider.
- » The ICVA may provide accommodations that are different than what a candidate requests, when doing so will result in an appropriate and reasonable accommodation. ICVA also may deny requested accommodations where they create an undue financial or administrative burden on ICVA or Prometric, which operates the testing centers at which the NAVLE is offered.
- » A primary concern in evaluating accommodation requests is the need to ensure that such requests do not either (1) provide an unfair advantage to candidates without a true and documented disability or (2) interfere with the measurement of the skills and knowledge that the NAVLE is designed to measure.
- » Temporary physical or mental conditions generally are not disabilities under the ADA. By way of example only, temporary physical or mental conditions may include injuries, such as a broken arm, or situational reactions, such as symptoms triggered by the stress of difficult personal, academic, or professional circumstances, including but not limited to stress experienced when taking an exam.
- » Candidates with temporary, non-disabling physical conditions that may interfere with their equal access to the NAVLE may request a courtesy adjustment of non-standard testing conditions for the examination. Courtesy adjustments may be granted or denied, in whole or in part, at the sole discretion of ICVA. For further information on the courtesy adjustment request process for non-standard testing conditions, please contact the ICVA at [accommodations@icva.net](mailto:accommodations@icva.net).
- » Candidates requesting an accommodation are responsible for completing the Accommodation Request Form and providing all supporting documentation prior to the deadline applicable to the NAVLE testing window in which the candidate intends to take the exam. It also is the candidate's responsibility to ensure all requested supporting documentation is received by the deadline. Request forms received after the established deadline will not be considered for that testing window.
- » All submitted documentation will be treated in accordance with privacy and confidentiality protections afforded under applicable law. If you have any questions, please contact ICVA at [accommodations@icva.net](mailto:accommodations@icva.net).
- » If you are not approved for accommodations, but are approved for the NAVLE itself, you will be given the options of 1) taking the test with the standard format or 2) withdrawing and receiving a refund of the ICVA NAVLE fee, minus a \$200 nonrefundable processing fee. Please note, NAVLE approval fees and international testing fees are nonrefundable and nontransferable.

## SUBMITTING YOUR COMPLETED REQUEST FORM AND SUPPORTING DOCUMENTATION

Ensure delivery of your completed NAVLE Accommodations Request Form by the deadlines below via one of the methods below:

Testing Window	OCTOBER – NOVEMBER	MARCH	JULY – AUGUST
Deadline Date	No later than <b>July 15</b>	No later than <b>January 7</b>	No later than <b>May 7</b>

- Email: [accommodations@icva.net](mailto:accommodations@icva.net)
- Upload: <https://www.icva.net/modules/dashboard/#application1>
- Fax: (701) 224-0435

If submitting by e-mail or upload, you must submit this request form, your personal statement, and all supporting documentation in PDF format with scanned or electronic signatures. Signature pages may be submitted as a digital photograph file (.jpg or .jpeg).

Microsoft Word files cannot be authenticated and are not accepted. Google Drive, Dropbox, or other embedded cloud storage links are not accepted.

# NAVLE<sup>®</sup> ACCOMMODATION REQUEST PACKET

## SUMMARY OF TIME FORMATS

As an initial matter, candidates who are requesting additional time or additional breaks as potential accommodations should take care to note: All tests given with extended testing time and/or more frequent breaks MUST be taken over two days. The only formats available for the NAVLE are as follows:

Standard Format	<b>Day 1:</b>	15-minute tutorial, six blocks of 60 items in 65 minutes, and at least 45 minutes of breaks time, for a total of 7 hours and 30 minutes
More Frequent Breaks Only	<b>Day 1:</b>	15-minute tutorial, eight blocks of 24 items in 26 minutes, and at least 80 minutes of break time, for a total of 5 hours and 3 minutes.
	<b>Day 2:</b>	Seven blocks of 24 items in 26 minutes, and at least 80 minutes of break time, for a total of 4 hours and 12 minutes.
Up to One and One-Quarter (1.25) Time Only	<b>Day 1:</b>	15-minute tutorial, six blocks of 30 items in 45 minutes, and at least 45 minutes of break time, for a total of 5 hours and 30 minutes.
	<b>Day 2:</b>	Six blocks of 30 items in 45 minutes, and at least 45 minutes of break time, for a total of 5 hours and 15 minutes.
Up to One and One-Half (1.5) Time Only	<b>Day 1:</b>	15-minute tutorial, six blocks of 30 items in 50 minutes, and at least 45 minutes of break time, for a total of 6 hours.
	<b>Day 2:</b>	Six blocks of 30 items in 50 minutes, and at least 45 minutes of break time, for a total of 5 hours and 45 minutes.
Up to Double (2) Time Only	<b>Day 1:</b>	15-minute tutorial, six blocks of 30 items in 65 minutes, and at least 45 minutes of break time, for a total of 7 hours and 30 minutes.
	<b>Day 2:</b>	Six blocks of 30 items in 65 minutes, and at least 45 minutes of break time, for a total of 7 hours and 15 minutes.
Up to Double Time and More Frequent Breaks	<b>Day 1:</b>	15-minute tutorial, 15 blocks of 12 items in 26 minutes, and at least 115 minutes of break time, for a total of 8 hours and 40 minutes.
	<b>Day 2:</b>	15 blocks of 12 items in 26 minutes, and at least 110 minutes of break time, for a total of 8 hours and 20 minutes.

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## ACCOMMODATIONS REQUEST FORM

The Accommodations Request Form must be completed by the candidate requesting the accommodation. Please type or clearly print the information requested below. If more space is needed to provide a complete response, please attach additional sheets of paper as needed.

### Section 1: Identification and Contact Information

Name: \_\_\_\_\_

ICVA Identification Number (if available): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Number and Street Apartment/Unit Number

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City State/Province Zip/Postal Code Country

Preferred Telephone Number: \_\_\_\_\_ Preferred Email Address: \_\_\_\_\_

### Section 2: NAVLE History

Have you taken the NAVLE in the past?  No  Yes If so, when? \_\_\_\_\_

### Section 3: Information About Your Impairment and its Impact on a Major Life Activity

Write below (or attach as a separate document) a signed and dated personal statement that

- 1 identifies the physical and/or mental impairment(s) that are the basis for your request for a testing accommodation;
- 2 describes how the impairment(s) substantially limit a major life activity; and
- 3 explains how standard NAVLE examination conditions are not consistent with your condition and your requested testing accommodation is instead necessary.

When describing how the impairment(s) substantially limit a major life activity, do not confine your statement to standardized test performance, but instead also explain how the impairment limits your activities in other areas of your life. In addition, please provide a rationale for why the specific accommodation that you are requesting is necessary for you in the context of the NAVLE.

### Section 4: Prior Testing Accommodations – Same Accommodation Requested

Are you asking for testing accommodations on the upcoming NAVLE that are the same as testing accommodations that you received in academic or high stakes testing settings in the past?

No

Please go to [Section 5: First-Time or Different Accommodation Request](#).

Yes

Please identify below the testing accommodation(s) that you are requesting for the NAVLE and the testing accommodations that you have received in the past. Please also attach sufficient official documentation from the institution(s) and/or test administrator(s) that provided the accommodation to demonstrate proof that the testing accommodation was granted.

### What testing accommodations are you requesting for the NAVLE?

Please select from the list below if you are seeking additional breaks or extended time. If you require different or additional accommodations, please specify them in the "other" section:

- More Frequent Breaks Only
- Up to One and One-Quarter (1.25) Time Only
- Up to One and One-Half (1.5) Time Only
- Up to Double (2) Time Only
- Up to Double Time and More Frequent Breaks

Other:

### Testing Accommodations Received on Other Standardized/High-Stakes Examination(s):



**Testing Accommodations Received in Veterinary School:**

**Testing Accommodations Received in College, University, or other Post-Secondary or Secondary Education:**

**Documentation:**

Please obtain and submit documentation from a qualified professional that clearly establishes the following:

- 1 the professional is qualified to diagnose your underlying physical or mental impairment;
- 2 the professional has in fact evaluated you and diagnosed you with the impairment at issue (either initially or upon a re-evaluation);
- 3 that you continue to need the specific accommodation requested in light of the diagnosed condition; and
- 4 how and why the requested accommodation is justified and necessitated by your condition.

The documentation must be legible (i.e., typewritten), signed, dated, and submitted on the professional’s letterhead. A brief listing of the professional’s qualifications (including degree, licensure, and areas of specialization) should be included either in the evaluation or in a separate written document. The documentation should be recent.

OR, please obtain and submit documentation of previous accommodations on high-stakes examinations (SAT, GRE, etc.) or previous academic accommodations (secondary or post-secondary institutions).

**⚠ Note: All requested documents must be provided by the deadline applicable to the NAVLE testing window in which the candidate intends to take the exam.**

## Section 5: First-Time or Different Accommodation Request

(Please skip this section if you answered “yes” to the question in [Section 4: Prior Testing Accommodations – Same Accommodation Requested.](#))

### What testing accommodations are you requesting for the NAVLE?

Please select from the list below if you are seeking additional breaks or extended time. If you require different or additional accommodations, please specify them in the "other" section:

- More Frequent Breaks Only
- Up to One and One-Quarter (1.25) Time Only
- Up to One and One-Half (1.5) Time Only
- Up to Double (2) Time Only
- Up to Double Time and More Frequent Breaks

Other:

Please explain in detail why you believe that you need the testing accommodation(s) identified above. When doing so, please explain how the requested accommodation relates specifically to the disability discussed in your personal statement in [Section 3: Information About Your Impairment and its Impact on a Major Life Activity.](#)

If you never previously received a testing accommodation, please explain why you have not needed testing accommodations until this NAVLE testing window.

**Documentation:**

Please obtain and submit documentation from a qualified professional that clearly establishes the following:

- 1 the professional is qualified to diagnose your underlying physical or mental impairment;

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- 2 the professional has in fact evaluated you and diagnosed you with the impairment at issue (either initially or upon a re-evaluation);

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- 3 that you continue to need the specific accommodation requested in light of the diagnosed condition; and

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- 4 how and why the requested accommodation is justified and necessitated by your condition.

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The documentation must be legible (i.e., typewritten), signed, dated, and submitted on the professional’s letterhead. A brief listing of the professional’s qualifications (including degree, licensure, and areas of specialization) should be included either in the evaluation or in a separate written document. The documentation should be recent.

**⚠ Note: All requested documents must be provided by the deadline applicable to the NAVLE testing window in which the candidate intends to take the exam.**

**Section 6: Certification and Authorization**

By signing below, I certify and affirm that the information reported in this Accommodation Request Form is true and accurate. I acknowledge that this Accommodation Request Form and all supporting documentation submitted by me or on my behalf must be received by the ICVA no later than the identified deadline in order for my request to be evaluated and processed. I acknowledge that my request for a testing accommodation may be denied if this Request Form or any necessary supporting documentation is received after the identified deadline.

I will respond promptly and completely to any and all requests to clarify, correct, and/or supplement my accommodation request within any subsequent deadline set by the ICVA. I acknowledge that my request for a testing accommodation may be denied any additional information is received after the identified subsequent deadline.

I acknowledge and agree that the ICVA will use the information and documents submitted by me or on my behalf to decide whether I am eligible for testing accommodations and, if so, what accommodations will be effective for me. I understand that the testing accommodations that I am provided, if any, may be different from the accommodation I requested.

I acknowledge and agree that the ICVA may disclose information and documents submitted by me or on my behalf to qualified third parties for the purpose of evaluating my eligibility for a testing accommodation.

I acknowledge that any false information provided in this Accommodation Request Form or in connection with my request for a testing accommodation may be the basis for my request to be denied or delayed.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature