



Ohio Revised Code

Section 3304.23 Form for inclusion in database of persons with a communication disability.

Effective: March 20, 2025

Legislation: Senate Bill 196 - 135th General Assembly

(A) As used in this section:

(1) "Clinical nurse specialist" and "certified nurse practitioner" have the same meanings as in section 4723.01 of the Revised Code.

(2) "Communication disability" means a human condition involving an impairment in the human's ability to receive, send, process, or comprehend concepts or verbal, nonverbal, or graphic symbol systems that may result in a primary disability or may be secondary to other disabilities.

(3) "Disability that can impair communication" means a human condition with symptoms that can impair the human's ability to receive, send, process, or comprehend concepts or verbal, nonverbal, or graphic symbol systems.

(4) "Guardian" has the same meaning as in section 2111.01 of the Revised Code.

(5) "Physician" means a person licensed to practice medicine or surgery or osteopathic medicine and surgery under Chapter 4731. of the Revised Code.

(6) "Psychiatrist" has the same meaning as in section 5122.01 of the Revised Code.

(7) "Psychologist" has the same meaning as in section 4732.01 of the Revised Code.

(B) The opportunities for Ohioans with disabilities agency shall develop a verification form for a person diagnosed with a communication disability or a disability that can impair communication to be submitted voluntarily to the department of public safety so that the person may be included in the database established under section 5502.08 of the Revised Code. The same form shall be used to indicate that the person wishes to be removed from the database in accordance with division (F) of



section 5502.08 of the Revised Code.

(C) The form shall include the following information:

(1) The name of the person diagnosed with a communication disability or a disability that can impair communication;

(2) The name of the person completing the form on behalf of the person diagnosed with a communication disability or a disability that can impair communication, if applicable;

(3) The relationship between the person completing the form and the person diagnosed with a communication disability or a disability that can impair communication, if applicable;

(4) The driver's license number or state identification card number issued to the person diagnosed with a communication disability or a disability that can impair communication, if that person has such a number;

(5) The license plate number of each vehicle owned, operated, or regularly occupied by the person diagnosed with a communication disability or a disability that can impair communication or registered in that person's name;

(6) A certification that the person has been diagnosed with a communication disability or a disability that can impair communication, signed by a psychiatrist or other physician, a psychologist, a clinical nurse specialist, or a certified nurse practitioner;

(7) The name, business address, business telephone number, and professional license number of the professional making the certification described in division (C)(6) of this section;

(8) The signature of the person diagnosed with a communication disability or a disability that can impair communication or the signature of the person completing the form on behalf of such a person;

(9) A place where the person diagnosed with a communication disability or a disability that can impair communication or the person completing the form on behalf of such a person may indicate



the desire to be removed from the database.

(D) Any of the following persons may complete the verification form:

(1) Any person diagnosed with a communication disability or a disability that can impair communication who is eighteen years of age or older;

(2) The parent or parents of a minor child diagnosed with a communication disability or a disability that can impair communication;

(3) The guardian of a person diagnosed with a communication disability or a disability that can impair communication, regardless of the age of the person.

(E) The opportunities for Ohioans with disabilities agency and the department of public safety shall make the verification form electronically available on each of their respective web sites.