

2005-2006 Application for an Allowance for Special Needs

Secondary-Level Adult Education, Secondary-Level Vocational Training, College and University

1088

Adult

General Information

Under the Allowance for Special Needs Program, students with a major functional disability or other recognized disability are entitled to financial assistance to purchase equipment or materials that compensate for the effects of their disability and that they must have in order to do academic work at home (i.e. a computer and peripherals, a communication aid or adaptive equipment) or to cover the cost of specialized services they need in class or transportation. In the case of specialized services, the amount allowed is based on the number of hours spent with the student and paid by the student, provided no other organization is covering the special need in question.

The term "student with a major functional disability" refers to a person whose disability significantly and persistently limits his or her ability to perform normal daily tasks and to pursue studies. The major functional disabilities are the following: severe hearing impairments, severe visual impairments and motor or organic impairments resulting in significant and persistent limitations. The other recognized disabilities are the following: language or speech impairments, paralysis of a single limb, paresis of one or more limbs and hearing capability corresponding to a hearing threshold of 25 decibels.

The Allowance for Special Needs Program is intended for full-time or part-time students in secondary-level adult education, secondary-level vocational training, college or university. "Part-time" is defined as follows: 20 or more course hours per month or what has been declared as such by the educational institution.

Certain provisions of the Loans and Bursaries Program apply to students with major functional disabilities (see the brochure entitled Student Financial Assistance).

For information on the Allowance for Special Needs Program, go to <www.afe.gouv.qc.ca/english>, click on Information and then on Other Programs.

Required Documents Required Documents

• If this is your first application for an allowance for special needs, you must attach a proof of citizenship unless you have already provided such proof with your application for financial assistance under the Loans and Bursaries Program.

➤ Canadian citizen by birth	A copy of your birth certificate or copy of act of birth showing the first and last names of both your father and mother
➤ Naturalized Canadian citizen	A copy of both sides of your Commemoration of Canadian Citizenship certificate issued by Citizenship and Immigration Canada
➤ Permanent resident	A copy of the record of landing issued by Citizenship and Immigration Canada (IMM 1000), copy of the <i>Confirmation of Permanent Resident</i> form (IMM 5292) or copy of both sides of your permanent resident card issued by Citizenship and Immigration Canada
➤ Refugee or protected person	Certificat de sélection du Québec (Québec selection certificate) issued by the Ministère de l'Immigration et des Communautés culturelles AND Notice of decision issued by the Immigration and Refugee Board or Pre-Removal Risk Assessment decision issued by Citizenship and Immigration Canada OR Protected Person Status Document issued by Citizenship and Immigration Canada

Required Documents (cont.)

- If you have a major functional disability and wish to apply for an allowance for special needs, you must attach a Medical Certificate-Major Functional Disabilities and Other Recognized Disabilities form completed by a general practitioner or specialist. You need not resubmit this form if it has already been submitted and accepted as part of your application for financial assistance under the Loans and Bursaries Program or if this is your second or later application for an allowance and your disability and the resulting limitations have not changed.
- If you have another recognized disability and wish to apply for an allowance for special needs, you must attach a *Medical Certificate-Major Functional Disabilities and Other Recognized Disabilities* form completed by a general practitioner or specialist.
- If you have a motor or organic impairment and have not applied for an allowance for special needs since May 1, 1994, you must attach a Medical Certificate-Major Functional Disabilities and Other Recognized Disabilities form.
- Section 6 of this form ("Recommendation") must be completed in all cases to justify the application for an allowance for special needs.
- When applying for an allowance for special needs, you must submit:
- one estimate only if the amount concerned is lower than \$1 000 or in the case of communication aids
- three estimates from three different stores if the amount concerned is equal to or greater than \$1 000

Procedure Procedure

- Please print.
- You must submit this form at the beginning of the first study period of each award year and enclose all required documents.
- You must wait for AFE's authorization before you purchase the equipment.
- In the case of specialized services, enclose a copy of all service contracts along with your application (for details on the information that must appear in such contracts, see the model contract). Once your application has been approved, you will receive an allowance equal to 100% of your estimated services as advance payment. At the end of the study period, you must submit all your receipts to the school administration, the office for students with disabilities or the financial assistance office at your educational institution. Any necessary adjustments will be made at this time.
- The equipment or materials must be purchased within 45 days following the receipt of the allowance (cheque). Send the paid invoice to AFE with the student's name and permanent code.
- The cheque will be made out in your name.
- For more information, contact the financial assistance office or services for disabled students at your educational institution. You can also call us at (418) 646-6006. If you are hearing-impaired, call 711 (Bell Relay Service) and ask for (418) 646-6006.
- You must send your application by fax at (418) 528-0318 or by mail at this address: 1035, rue De La Chevrotière, Québec, (Québec) G1R 5A5
- If you are not satisfied with the way in which your application was handled, you may, depending on your particular case, report a change in your circumstances, file an application with the Review Bureau or the Examination Committee for Exceptional Cases or send a complaint in writing to AFE.



Material resources

The maximum amount allowed for the purchase of a computer is \$2 000 (including a keyboard, screen, modem, mouse and printer). The maximum amount allowed for the purchase of a portable computer is \$3 000 if the student is enrolled in a program recognized for this purpose by Aide financière aux études (AFE) and the use of a portable is a requirement in the program. No other peripherals or adaptive devices will be covered except in special cases where they are needed to compensate for the effects of the disability.

Specialized Services

The maximum number of hours which may be reimbursed for each service is equivalent to the number of course hours taken. In the case of interpretation services, two extra hours will be reimbursed for meetings with the teacher or professor. Additional hours may be reimbursed if the student can prove that they were directly related to his or her courses and necessary in order to pass the courses, given his or her disability. Additional hours must also be justified by the appropriate official at the educational institution, who must, for each service concerned, provide details on all the instances in which the service was required, give the hourly rate charged and specify the amount of time (in hours and minutes) for which the service was required. At the college level in the public sector, specialized services are provided by the educational institutions.

Transportation

- The maximum allowed is two trips per day.
- Students who use their car or car pool because public paratransit is unavailable where they live are not required to submit receipts. They will be granted the maximum weekly amount allowed under the Loans and Bursaries Program for transportation costs.
- When a student considered to be living with his or her parents claims a reimbursement for transportation costs, the student must contribute a minimum amount toward these costs. This minimum contribution will therefore be deducted from the amount claimed. If the student is allowed an amount for transportation costs under the Loans and Bursaries Program, this amount will be taken into account in determining the amount of the reimbursement. If the student is not receiving financial assistance under the Loans and Bursaries Program, he or she must nonetheless contribute toward these costs. In such cases, the amount allowed for transportation costs under this program is deducted from the amount claimed.
- Students who live outside a 50-km radius of their educational institution are strongly advised to rent a special needs room on campus or in the vicinity. A monthly maximum of \$100 is added to cover the cost of a special needs room in the case of students who move close to the educational institution when they had the option of living with their parents and using paratransit.



2005-2006 Application for an Allowance for Special Needs

Secondary-Level Adult Education, Secondary-Level Vocational Training, College and University

	Reserved for Aide financière aux études
Have you applied or will you apply for financial assistance for 2005-2006	under the Loans and Bursaries Program?
Student Information	
Section Student Information	
•	Demonstrate and a serious of location and location and locations
Last name	Permanent code assigned by the Ministère
First name	Date of birth
Language of correspondence:	
Citizenship status	
Canadian citizen by birth Naturalized Canadian citizen	Effective date when permanent resident status
Permanent resident	or refugee status was obtained
☐ Refugee Mailing address	
Number Street	Direction
	(North, South, East or West
Apartment Municipality	
Municipality (cont.)	
	Area code
Country	
Solution Education	
Section Education	
Give the dates for each situation that applies or will apply to you d	uring the award year.
I will not be studying.	From to
I will be studying at the secondary level in adult education	From to
I will be studying at the secondary level in vocational training	
I will be studying at the college level.	
I will be studying at the university level.	
Secondary-level vocational training	
Attach a list of the modules taken indicating the duration of each module	e (in hours) and the start and end dates of the study period concerned.
Secondary-level adult education	
Attach a letter signed by the principal giving the name and address of the hours taken per week and the year of the program you are in.	the school, the dates on which courses begin and end, the number of course
	,

Section 2	Education (cont.)

College or university studies	
	on, the study period concerned, the name of the program, the courses taken
and, for each course, the number of hours or credits. In addition, you mus	
Situation 1	From
Name of the institution	Name of your program
Number of hours (college) or credits (university) for the study period concer-	
Situation 2	From
Name of the institution	Name of your program
Number of hours (college) or gradite (university) for the study paried appear	hours credits
Number of hours (college) or credits (university) for the study period concer	rried.
Situation 3	
Name of the institution	Name of your program
Number of hours (college) or credits (university) for the study period concer	hours □
Trained of floate (college) of closure (aniivolety) for the study polled college	33300
Coopiel Noods	
Section Special Needs Special Needs	
Specialized services	uplite 1009/ of your estimated continue as advance powers. At the and of the
	all to 100% of your estimated services as advance payment. At the end of the the office for students with disabilities or the financial assistance office at your
	(See appended model receipt.) Check the services that you require and indi-
cate the study period(s) concerned. Reader	From Y M D Y M D
	From to
□ Note Taker	From to
☐ Transcriber • C-NOTE ☐	From to
• Shorthand	From to
Interpreter	From to
Attendant • Academic support	From to
• Hygiene	From to
• Mobility assistance	From to
Enclose a service contract for each service required. (See appended mode	el receipt.)
Material resources	
Equipment and adaptive devices	
 Have section 6, ("Recommendation") completed. 	
• Attach:	win the same of communication side
 one estimate only if the amount concerned is lower than \$1 000 or three estimates from three different stores if the amount concerned 	
	d is equal to or greater than \$1 000
 You must purchase the equipment or materials within 45 days follow 	id is equal to or greater than \$1 000 ving the receipt of your allowance (cheque) and send the paid invoice to

 □ Reproduction in braille (Note that reproduction does not include translation □ on paper □ on diskette • During the study period, send in the bills for payment. 	on, transcription or typing.)
on diskette	
During the study period, send in the bills for payment.	
Transportation	
Please check the appropriate box for each study period.	V M D V M D
☐ Public paratransit ⁽¹⁾	From to
Alternatives to paratransit	V M D V ·· -
Personal vehicle	From to T
☐ Car pooling	From to Y
Private paratransit ⁽²⁾ or taxi ⁽²⁾⁽³⁾	From to Y
☐ Special needs housing ⁽⁴⁾	From
1. Attach a letter from the carrier confirming the monthly cost.	
 such a letter each award year. or Attach a letter from the regional paratransit corporation or the appropriate autransit and explaining why your needs cannot be met (conflicting schedules, 3. Attach an estimate by the carrier (including the taxi licence number) indicating the tion. For each study period, attach your schedule and give the dates on which condition and the estimated total cost for the study period. Enclose a copy of your instant. 	the educational institution is located outside the territory served, etc.). The cost of a return trip between your residence and the educational institutures begin and end, the number of return trips required for the study perititution's academic calendar.
4. Attach a copy of a lease, a proof of your home address and a proof of your s	second address.
Any information I provide in my application for an allowance for special needs a the personnel of the office for students with disabilities or its equivalent at my ed Signature X (If the student is unable to sign, the form must be signed by the holder of paren	nd any information related to my special needs file may be released to lucational institution so that they can take the appropriate action. Date
This consent is optional and may be withdrawn at any time.	

Section	Signature Student Signature	
I hereby certify th	at the information I have given is accurate and complete.	Date Y M D
Signature X		_
(If the student is t	unable to sign, the form must be signed by the holder of parental authority.)	

This section must be completed by the appropriate authority:	
Secondary-level adult education or vocational training: - hearing impairment: an audiologist - visual impairment: the appropriate authority at a low-vision centre - motor impairment: an occupational therapist - other disabilities: an occupational or speech therapist	
College: the administration of the educational institution	
University: the person in charge of the office for students with disabilities	
A. Details	
Please provide details on the needs identified in section 3 and explain why the service, equipment or material effects of the disability or to enable the student to pursue his or her studies (provide details for each item reciplease attach a separate sheet.	
B. Personal information and signature of the appropriate authority	
Please print.	
Last name Professional licence nur	
First name Teleph	Area code
Work address	Area code Fax
Profession	
Signature X	Date Y M D



2005-2006 Application for an Allowance for Special Needs-Appendix

Service Contract

		Pe	ermanent code assigned by the Ministère	
Service contract between	Student's name			
	Student's name			
and	Name and address of specialized I	resource person		
ervice				
lease check the appropriate box				
Reader	☐ Transcriber	Attendant		
 Note taker Interpreter	☐ C-NOTE ☐ Shorthand	☐ Acaden ☐ Hygiene	nic support	
	_ Onormand		assistance	
tudy period	ALL 2005 WINTER 200	06 SUMMER 200	06	
eneck one box only)	From	to 4	M D	
Course number	Number of hours	Hourly rate	Total (\$)	
anatures				
neidles			Date	
V			Y M D	
udent signature X				
anature of enocialized resource	person X			



At the end of the study period, you must subm		·	nts with disabilitie	es or the financial assis-
tance office at your educational institution. Any	/ necessary adjustments v	will be made at this time.		
You may copy this receipt and use it each time	ne you need to issue a re	eceipt for a specialized resource person.		
			Permanent code a	assigned by the Ministère
Received from		'		1
Neceived IIOIII	Student's name			
the sum of	for			
Amount	101	Services render	red	
Study period (check one box only):	☐ FALL 2005	☐ WINTER 2006 ☐ SUM	MMER 2006	
Period covered by the receipt from	M D	to Y M D		umber hours
Signatures Signatures				
Student signature X				Date Y M D
Signature of the specialized resource person	<u>x</u>			
Signature of the appropriate authority at the e (School principal or person responsible for the			fice)	