

This form must be completed by the student or person with parental authority who wishes to have equipment obtained under the Allowance for Special Needs Program repaired.

Section 1 Student Information

Last name Permanent code assigned by the Ministère

First name

Number Street Direction
(North, South, East or West)

Apartment Municipality

Municipality (cont.) Province Postal code Telephone (home)
Area code

Elementary- or secondary-level education

Attach a letter signed by the principal of the school, giving the school's name and address, the dates on which courses begin and end, the number of course hours and the name of the program.

College- or university-level education

Attach proof of registration indicating the name of the educational institution, the study period concerned, the name of the program, the courses taken and, for each course, the number of hours or credits.

I authorize the technical assistance service of the educational institution recognized by the Ministère de l'Éducation, du Loisir et du Sport or the business mentioned in Section 2 to estimate the cost of repairing equipment obtained under the Allowance for Special Needs Program and to submit the estimate to Aide financière aux études (AFE) for approval.

Signature of the student or the person with parental authority _____

Date

Y M D

Section 2 Technical Assistance Service or Business

Have this section completed by an authorized person from the technical assistance service or, in the case of computer repairs, from the business that sold the unit. This person must then fax the form to AFE at (418) 528-0318.

Name of the educational institution or business

Number Office Street

Direction Municipality
(North, South, East or West)

Municipality (cont.) Province Postal code

Last name of the authorized person

First name of the authorized person Telephone
Area code Fax
Area code

Section 2 Technical Assistance Service or Business (cont.)

Estimate

Parts to be replaced (description)		Cost
_____		_____
_____		_____
_____		_____
_____		_____
_____		_____
Hours of work	Hourly rate	GST
_____	_____	_____
		QST

		Total cost

Signature of the authorized person X _____

Date

Y	M	D

Section 3 Authorization

Aide financière aux études Authorization

- I authorize the technical assistance service of the educational institution recognized by AFE or the business mentioned in Section 2 to carry out the repairs described above. AFE undertakes to issue a cheque to the order of the student for the repairs.
- I do not authorize the repairs described above.

Grounds: _____

Signature of the authorized person X _____

Date

Y	M	D