If you have a documented permanent disability and are attending post-secondary studies, you may be eligible to receive more student aid. You must include medical documents with your first application.

What is a Permanent Disability?
A permanent disability is a functional limitation caused by a physical or mental impairment that restricts the ability of a person to perform the daily activities necessary to participate in studies at a post-secondary level or labour force, and is expected to remain with the person for the person’s expected natural life.

Before applying...
Talk with a Disability Advisor/Reviewer at your school about your educational goals and what kind of supports may already be in place at your chosen institution.

What permanent disability student aid could I be eligible for?
- **Canada Student Grant for Students with Permanent Disabilities**: $2,000 per loan year to assist you with education and living costs.
- **Canada Student Grant for Services and Equipment for Students with Permanent Disabilities**: Up to $20,000 per loan year to help you with exceptional education related costs such as assistive services or equipment.
- The Canada Student Grants program may cover up to 75% of the cost of a **Learning Assessment** (up to a maximum of $1,700 per loan year) if the assessment confirms you have a learning disability.

When should I apply?
It is best to apply by early July for September study. You can apply at any time of the year but Alberta Student Aid must receive your application, including Schedule 4, at least 30 days before this application’s session end date.

What is a reduced course load?
Your disability may limit you from taking a full course load. If so, you can carry as little as 40% of a full course load and still apply for full-time student aid. Your Schedule 4 must be signed by an official at your school to confirm that you are taking a reduced course load. If you are studying part-time, you may also be eligible for permanent disability funding. A part-time application can be printed from studentaid.alberta.ca

Tips for completing your Schedule 4
- All $ amounts must be submitted in Canadian dollars.
- If you apply for student aid online, you must still submit a paper Schedule 4.
- Attach all required documentation to your Schedule 4.
- The Disability Advisor/Reviewer at your school is required to sign Section 4 of your Schedule 4.
- If you are applying for a reduced course load, Section 3 of your Schedule 4 must be signed by an official at your school. The Disability Advisor/Reviewer at your school may also be authorized to sign this section. Check with the advisor/reviewer first for assistance and further instructions.

Do I need to keep receipts?
If you receive student aid for assistive services and equipment, you must submit your receipts to Alberta Student Aid by the end of your current study period to show that the student aid you received was used as intended. Write your Social Insurance Number (SIN) and your name on each receipt.

If you do not use all of the student aid, you must return the unused funds to Alberta Student Aid. Make your cheque or money order payable to Government of Alberta. If you do not send receipts or return the unused funds, you will be in an overaward situation.

Upload or Mail Your Form
Send documents electronically
1. Visit studentaid.alberta.ca
2. Sign in to your account
3. Submit securely using Upload Electronic Document(s)
For assistance: eDoc Upload FAQs

Mailing Address
Alberta Student Aid
Attention: Disability Grants
PO Box 28000 Stn Main
Edmonton AB T5J 4R4

Applicant Agreement
If I receive a disability grant for services or equipment for post-secondary students with permanent disabilities, I hereby agree to provide, by the end of my current study period, receipts which will show that the student aid was spent for its intended purposes.

Include your name and Social Insurance Number on all receipts sent to the address above. Receipts may also be uploaded electronically.

Applicant’s Signature
Today’s Date
Telephone Number (format: 999-999-9999)

Schedule 4 Last revised June 2019
### Summary of Disability Documentation Required

<table>
<thead>
<tr>
<th>Type of Disability</th>
<th>Documentation Required</th>
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</table>
| Deaf, Hearing Impaired                   | • Audiologist report, or  
• Letter from a physician with an explanation of the degree of hearing loss |
| Blind, Visually Impaired                 | • Specialist report, or  
• Letter from a physician with a description of the functional limitations |
| Learning Disability                      | • Psycho-educational report from a Psychologist, or  
• Neuro-psychological report          |
| Speech                                   | • Speech language pathologist report                                                  |
| Mobility/Agility Impairment              | • Specialist report, or  
• Letter from a physician with an explanation of the nature of the mobility/agility  
impairment (functional limitation) |
| ADD / ADHD                               | • Psychologist report, or  
• Neuro-psychological report, or  
• Letter from a psychiatrist, or  
• Letter from a physician with details about the diagnosis |
| Psychiatric or Psychological             | • Psychologist report with a DSM diagnosis, or  
• Letter from a psychiatrist with a DSM diagnosis, or  
• Letter from a physician with details about the diagnosis including the DSM |
| Autism, Asperger, Rett                   | • Psychologist report, or  
• Letter from a physician with details about the diagnosis |
| Brain Injury/Cognitive Impairment        | • Neuro-Psychological report, or  
• Brain injury/cognitive impairment report/assessment |
| Other Permanent Disability such as:      | • Chronic Fatigue: a detailed letter from physician  
• Irlen Syndrome: assessment report from a certified Irlen Screener |
Advanced Education is collecting this personal information under the authority of section 33(c) of the Freedom of Information and Protection of Privacy Act (Alberta) to determine and verify the Applicant’s eligibility for financial assistance, to administer (including research, statistical analysis and evaluations) and to enforce student financial assistance programs in accordance with the Student Financial Assistance Act (Alberta), the Canada Student Loans Act and the Canada Student Financial Assistance Act, each as may be amended from time to time. The use and disclosure of your personal information is managed in accordance with the Freedom of Information and Protection of Privacy Act (Alberta). If you have any questions about the collection, use or disclosure of this information, call the Alberta Student Aid Service Centre toll free at 1-855-606-2096 from anywhere in North America. You can also mail your questions to Alberta Student Aid, Privacy Officer, PO Box 28000 Stn Main, Edmonton AB T5J 4R4.

To complete a fillable form: 1. Save to your desktop. 2. Complete form. 3. Save final. Check, then submit. Never complete in a browser.

Applicant’s Last Name
Applicant’s First Name
Initials

Application ID

Enter your current study period start and end dates for the 2019/2020 school year.

Start
Day
Month
Year

End
Day
Month
Year

Learning Assessment Fee (enter 75% of the cost up to a maximum of $1,700) $ (You must attach your receipt.)

Section 1 – Assistive Services

When requesting Assistive Services, you must submit cost estimates and cost breakdowns. Depending on the requested service, this may include: number of hours per week, number of weeks, cost per hour, and number of courses.

Enter TOTAL amount for the current study period:

- Note Taker $ 
- Tutor with specific course knowledge (resumé required) $ 
- Academic Strategist (resumé required) $ 
- Interpreter (Oral, Sign, CART) $ 
- Educational Attendant Care (while in school) $ 
- Specialized Transportation (to and from school only) $ 
- Other Services $  
- $  
- $  
- $  

1 For tutor rates over $25 per hour, resumé/credentials must be provided.
2 A resumé/credentials must be provided for all Academic Strategy requests.

Comments for Requested Assistive Services:
## Section 2 – Equipment/Assistive Technology

When requesting Equipment/Assistive Technology, you must submit a copy of an estimate/quote for each item.

Enter the description and amount for the current study period:

- Electronic Reading/Writing Software (e.g. Kurzweil, Dragon) $
- Assistive Software (e.g. Inspiration) $
- Digital Recorder/Smartpen $
- Assistive Devices for the Visually Impaired $
- Assistive Devices for Hearing $
- Alternate Formats $
- Computer/Laptop/Tablet $
- Other Equipment $

Comments for Requested Equipment/Assistive Technology:

## Section 3 – For Educational Institution Use Only - Do Not Write in this Area

**Reduced Course Load** (to be completed by the Disability Advisor/Reviewer or Financial Aid Officer or Registrar ONLY if you are enrolling in between 40% to 59% of a full course load and want to be considered for full-time student aid)

What is the student's percentage of a full course load?  %

Signature of School Official

 Printed Name of School Official

**Today's Date**

<table>
<thead>
<tr>
<th>Day</th>
<th>Month</th>
<th>Year</th>
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<tbody>
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</table>

Telephone Number (format: 999-999-9999)
### Nature of Permanent Disability

(Documentation regarding the nature of permanent disability must be attached if not previously provided.) Please check appropriate box(es):

- Deaf, Hearing Impaired
- Blind, Visually Impaired
- Learning Disability (list below)
  - ____________________
  - ____________________
  - ____________________
- ADD/ADHD
- Psychiatric or Psychological
- Autism, Asperger, Rett
- Brain Injury/Cognitive Impairment
- Other Permanent Disability (see Information and Instructions for definition of permanent disability)
- Speech
- Mobility/Agility Impairment

**TOTAL recommended services/equipment**  
$  

Attach documentation itemizing the assistive services and/or equipment that covers the above.

**Email Address of Disability Advisor/Reviewer**

**Signature of Disability Advisor/Reviewer**  
**Name (please print)**  
[+] SIGN HERE

**Today's Date**  
Day | Month | Year
--- | --- | ---

**Direct Telephone Number of Disability Advisor/Reviewer** (format: 999-999-9999)  

**Internal Comments:**

**Reviewer:**

**Date**  
Day | Month | Year