

Skills Development Accessibility Supports Application Form



Before you apply

Skills Development Accessibility Supports (SDAS) provides financial assistance to students who have a permanent disability and are approved to participate in the Skills Development (SD) Program. Financial assistance under SDAS is intended to support the costs of equipment and/or services to help reduce or remove educational barriers that are caused by the disability and are directly related to the delivery of the training program.

You can apply for SDAS at any time during your training program. A Student Accessibility Specialist (or other designated individual) at your training institution and your Case Manager will work with you to complete your application.

Applicant Information

First name

Last name

Case ID

Date of birth

Nature of Disability

Deaf, Hard of hearing

Blind, low vision

Physical

ADD/ADHD

Mental health

Learning disability

Other (e.g., Chronic illness, Head Injury, Cerebral Palsy, Cognitive, Autism Spectrum, etc.).

Please specify:

SDAS Request for Equipment or Services

Indicate below the equipment and/or services being requested.

Equipment Request

Your Case Manager will enter the rationale for the request based on the information from the Student Accessibility Specialist (or other designated individual) at your training institution.

Equipment Type	Rationale for the request
<input type="checkbox"/> Computer <ul style="list-style-type: none">- Funding amount: Flat rate \$900- Quotes are not required	
<input type="checkbox"/> Assistive computer software <ul style="list-style-type: none">- Funding amount – 100% of the cost- One (1) quote required	
<input type="checkbox"/> Assistive accessories <ul style="list-style-type: none">- 100% of cost- Two (2) quotes required	
<input type="checkbox"/> Noise cancelling head phones <ul style="list-style-type: none">- \$200 flat rate- Quotes are not required	
<input type="checkbox"/> Alternative format learning materials <ul style="list-style-type: none">- Funding amount – 100% of the cost- One (1) quote required	

Services Request

Additional information is required for each service requested.

- Tutor
- Academic coach
- Note taker
- Specialized service
- Learning disability assessment

Service Request – Tutor

Course Name	Service Start Date	Service End Date	# of hours per week	Hourly rate

Service Request – Note Taker

Course Name	Service Start Date	Service End Date	# of weeks	Course Rate

Service Request – other

Provide details and rationale for other services requested.

Notice for Applicants

Do not purchase equipment or services before you submit a SDAS Application Form to Employment Nova Scotia. Equipment and services purchased before you apply are not eligible for reimbursement.

If you purchase equipment and/or services after you apply to Employment Nova Scotia, but before your application is approved, you do so at your own risk. If your application is not approved, you are responsible for the expenses incurred.

If your application is approved, receipts are required to show proof of payment for all equipment and services.

Applicant's Declaration

The financial assistance requested is required to cover the cost of the equipment and/or services related to my disability(ies). I understand that I may be required to repay all or part of this assistance if the information is found to be inaccurate.

I hereby agree that I am required to retain all receipts which must be submitted to Employment Nova Scotia (ENS), and I will repay any funds for which I have no receipts or for funds that were paid to me and that I did not spend.

Applicant's signature

Date