

DFEi Supplementary Application Form
for Learners with Disabilities, Health Conditions and/or Specific Learning Difficulties

1. Instructions to Applicants	
1.1	The following application form must be completed in full and submitted with all documentation requested in order to apply for any supports or services on the basis of a disability, significant health condition and/or a specific learning difficulty.
1.2	Contact the Disability Advisor at (01 2809676) to discuss any issues relating to this application.
1.3	Complete in BLOCK Capitals.

2. Personal Details (complete in block capitals)

Name:	
Address:	

Date of birth:		PPS Number:																	
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Telephone No.:		Email address:		Course Code:	
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3. Indicate your primary disability, significant health condition or specific learning difficulty (please tick)
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<input type="checkbox"/> ADD/ADHD	<input type="checkbox"/> Deaf/Hearing Impairment	<input type="checkbox"/> Significant On-going Illness
<input type="checkbox"/> Aspergers Syndrome/Autism	<input type="checkbox"/> Mental Health Condition	<input type="checkbox"/> Neurological Condition (Brain injury, speech/language disability)
<input type="checkbox"/> Blind/Visual Impairment	<input type="checkbox"/> Physical Disability	<input type="checkbox"/> Other (Please state):
<input type="checkbox"/> DCD/Dyspraxia/Dysgraphia	<input type="checkbox"/> Specific/General Learning Difficulty	

4. Evidence Required (Note: Important Information)

4.1	Learners must provide evidence of all disabilities disclosed.
4.2	This information must be gathered as early as possible as it can take several months to get a disability verified.
4.3	Learners may not be able to commence their course if the supports are not in place.
4.4	Details of documentation required are outlined in the DFEi Information for Learners with a disability, Health Conditions and/or Specific Learning Difficulties. This is available from the admissions office at (01) 2809676, or info@dfei.ie or at www.dfei.ie .
4.5	Learners must provide 2 copies of all documentation (1 copy for the HEA and 1 copy for the Disability Advisor)
4.6	All information will be treated with sensitivity and in confidence.

5. Details of Supports (Complete as much as possible)
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5.1	Learners must outline details of supports received in 2 nd /3 rd Level.
5.2	Learners must outline the supports required in DFEi.
5.3	The level of supports and services provided by DFEi will depend on the grant allocated by the Higher Education Authority (HEA).
5.4	Learners are entitled to appeal the HEA decision.

[More >>>>](#)

Support Type	Supports actually received at 2 nd / 3 rd Level	Support required in DFEi
Personal Assistant		
Sign Language Interpreter		
Assistive Technology/Software		
Note taker		
Examination support (reader, scribe etc)		
Transport		
Learning Support (tutorial either 1:1 or in small groups)		
Alternative print format		
Other		

Signature: _____ Date: _____

Submission Checklist

<input type="checkbox"/>	Supplementary Application Form completed in full	<input type="checkbox"/>	Two (2) copies of Consultant/Psychologist report
<input type="checkbox"/>	Specific Learning Difficulty Assessment		

Office use only: