Section C: Evidence of Disability Form 2021

Please return completed pages 4 – 6 only of this form to CAO.

Instructions for completing this form:

This form has a dual purpose. Some Higher Education Institutions (HEIs) operate individual supplementary admissions routes for students with disabilities. This form is used by HEIs to provide verification of the applicant's disability and helps to determine appropriate supports at third level.

A number of colleges and universities operate a joint supplementary admissions route known as DARE (Disability Access Route to Education). This form is also used by DARE to help assess an applicant's eligibility for DARE. DARE requires an applicant to submit evidence of disability as part of his/her application. An application will not be complete until an applicant provides evidence of his/her disability AND Educational Impact Statement by **15 March 2021**. More information on DARE is available from **www.accesscollege.ie/dare**.

Steps to completing this form when applying to DARE:

This information provides a short guide to submitting evidence of your disability. **This information should** be read alongside the information in the DARE Handbook pages 3-20.

Applicants who are unsure about the evidence that they need to supply can contact any member of the DARE team. Contact details for the DARE team are listed in the DARE Handbook and on www.accesscollege. ie/dare.

- The online Supplementary Information Form (SIF) must be completed and **DARE Applicants must tick Yes to DARE under Question 1 by 17:15 on 1 March 2021**.
- Section B Educational Impact Statement must be downloaded, completed by the applicant's school and submitted by 15 March 2021.
- Section C Evidence of Disability Form 2021 must also be submitted. Applicants should ensure:
 - it has been completed AND signed by the appropriate professional AND
 - it contains the stamp of the appropriate professional OR is on headed paper OR is accompanied by a business card AND
 - the appropriate professional has filled in all parts of the form AND it is legible.
- Send the original Evidence of Disability form and Educational Impact Statement by post. Faxed/emailed documents are not accepted.
- Keep a photocopy of Evidence of Disability documentation for your personal records and don't forget to retain proof of postage.

Please Note:

- Section C Evidence of Disability Form is NOT a substitute for a full Psychological Assessment Report.
- Evidence from a support organisation is not accepted as verification of a disability.
- Completion and submission of pages 4-6 of this form are required, pages 1-3 are instructions and may be retained by the applicant or professional.



DARE applicants must send the Evidence of Disability & Educational Impact Statement to:

CAO, Tower House, Eglinton Street, Galway by 17:15 on 15 March 2021

Guide to providing evidence of your disability

Type of disability	Appropriate documentation	Type of professional	Required age of report
Attention Deficit Disorder (ADD)/Attention Deficit Hyperactivity Disorder (ADHD).	Evidence of Disability Form 2021 OR Existing report.	Consultant Psychiatrist OR Psychologist OR Neurologist OR Paediatrician.	Must be less than three years old i.e. dated after 1 February 2018 .
Autistic Spectrum Disorder (including Asperger's Syndrome).	Evidence of Disability Form 2021 OR Existing report.	Consultant Psychiatrist OR Psychologist OR Neurologist OR Paediatrician.	No age limit.
Blind/Vision Impaired.	Evidence of Disability Form 2021 OR Existing report.	Ophthalmologist OR Ophthalmic Surgeon.	No age limit.
Deaf/Hard of Hearing: Students may apply under ONE of the following categories: (A) Applicants who have an audiogram (B) Applicants who attend a School for the Deaf (C) Applicants with a Cochlear Implant.	 (A) Applicants who have an audiogram: Audiogram (B) Applicants who attend a School for the Deaf: Letter confirming attendance from Principal of School for the Deaf OR Evidence of Disability Form 2021. (C) Applicants with a Cochlear Implant: Existing report confirming cochlear implant OR Evidence of Disability Form 2021 (DARE does not accept reports from high street retailers). 	(A) Applicants who have an audiogram: Diagnostic/Clinical Audiologist registered with the Irish Academy of Audiologists (IAA) OR HSE Audiologist (B) School for the Deaf: Principal of School for the Deaf (C) Applicants with a Cochlear Implant: Ear, Nose and Throat (ENT) Consultant OR Cochlear Implant Programme Co-ordinator.	No age limit.
Developmental Co-ordination Disorder (DCD) - Dyspraxia.	Evidence of Disability Form 2021 OR Existing report.	Occupational Therapist OR Neurologist OR Physiotherapist OR Paediatrician.	No age limit on either document.
Mental Health condition.	Evidence of Disability Form 2021 OR Existing report.	Consultant Psychiatrist on specialist register.	Must be less than three years old i.e. dated after 1 February 2018 .

Guide to providing evidence of your disability Continued

Type of disability	Appropriate documentation	Type of professional	Required age of report
Neurological Condition (including Epilepsy and Brain Injury).	Evidence of Disability Form 2021 OR Existing report.	Neurologist OR Other relevant Consultant.	No age limit.
Physical Disability.	Evidence of Disability Form 2021 OR Existing report.	Orthopaedic Consultant OR Other relevant Consultant appropriate to the disability/condition.	No age limit.
Significant Ongoing Illness.	Evidence of Disability Form 2021 OR Existing report.	Relevant Consultant/ Specialist appropriate to the disability/condition.	Must be less than three years old i.e. dated after 1 February 2018 .
Speech and Language Communication Disorder.	Evidence of Disability Form 2021 OR Existing report.	Speech and Language Therapist.	No age limit.
Specific Learning Difficulty* (including Dyslexia & Dyscalculia).	Psychological Assessment Report	Psychologist	No age limit.

^{*} Applicants with an SLD must also submit attainment scores dated after **1 February 2019**. These should be entered in Indicator 6 of the Educational Impact Statement (see DARE Handbook page 14 or www.accesscollege.ie).

Important note for applicants to DARE with specific learning difficulties.

Section C Evidence of Disability Form is not required for applicants to DARE with an SLD. A full Psychological Assessment Report must be submitted as the evidence of disability documentation.

In addition to a Psychological Assessment Report of any age completed by a psychologist, applicants with a specific learning difficulty MUST also have two literacy or two numeracy attainment scores at or below the 10th percentile (Standard Score of 81 or below).

These attainment scores can be from one (or a combination) of the following sources:

Scores from school-based attainment testing

Scores from attainment tests carried out by a psychologist.

Testing must have been carried out on or after 1 February 2019 and all applicants must submit an EIS completed by their school.

General Practitioner (GP) completing this form:

Applicants who have an existing diagnosis but have difficulty accessing the appropriate professional to get confirmation of the existing diagnosis or an updated report may ask their general practitioner (GP) to complete the Section C Evidence of Disability form. However, the following apply:

- Your GP must have a clear diagnosis of your disability from one of the DARE appropriate specialists/consultants listed. A copy of a document in which your diagnosis is confirmed must be included in your application when using this GP verification.
- This document must be signed and dated by the appropriate specialist/consultant. If a time limit applies, the diagnosis or reconfirmation of diagnosis from the appropriate professional must have been made within that time limit.
- Your GP does not need to give you a copy of your entire file a single document which clearly names and confirms your diagnosis, is within the time limit (if one applies) AND is signed and dated by the appropriate specialist/consultant is sufficient.

For the purposes of DARE, only diagnoses made by a consultant/specialist are acceptable. A diagnosis made by a GP alone will not be acceptable and will lead to the applicant being made ineligible.

Please complete all sections below in TYPE or BLOCK capitals:

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1. Applicant details		
Title and Full Name of Applicant		
Date of Birth		
CAO Number		
2. Medical consultant/spe	cialist who made the diagnosis	
(GPs should not enter their own	details here, see further instructions below)	
Name and Title of Consultant/Specialist		
Position/Professional Credentials		
Date of Report		
Date of diagnosis/onset of disability		
Date of Referral		
Note for GPs: If form is comp	leted by a GP, GP must tick the following box:	
diagnosing the applicant with one or m	m the appropriate consultant/specialist named above, nore of the conditions indicated in Section 3. I have document in which their diagnosis is confirmed and is pplies) for submission with this form.	
If the information is on file, please complete sections 2-7 as appropriate.		

	Disability information Disability Type (please tick prin	nary disability):				
	ADD/ADHD		Neurological Condition (including Brain Injury & Epi	lepsy)		
	Autistic Spectrum Disorder (including Asperger's Syndrome)		Physical Disability			
	Blind/Vision Impaired		Significant Ongoing Illness			
	Deaf/Hard of Hearing		Speech and Language Communication Disorder			
	DCD-Dyspraxia		Specific Learning Difficulty (including Dyslexia & Dyscal	culia)		
	Mental Health Condition					
4.	Please state the specific name of the disability/condition (if relevant): Please state if there are any other disabilities/conditions: 4. History & detail of the disability/condition: Is the Disability: Congenital Acquired If acquired, is it: Permanent Temporary Fluctuating If temporary or fluctuating, please provide further detail:					
	5. Prognosis of the disability/condition Will the condition:					
	Remain static Have	periods of relapse/r	emission Be progre	ssive		
	If prognosis is uncertain, please give more detail:					

	e in detail measures currently being taken to ty (e.g. medication, therapy etc.)	treat the
field of	oplicant is Blind/Vision Impaired, state the visvision loss, loss of near vision, central vision where appropriate	•
_	oplicant has a Physical condition, state the le	• •
Where a Cons	sultant has completed this form, Consultant must sign below:	Official Stamp Required:
Consultant's sig	;nature:	
Date:		
IMC Number:		
Where the app	olicant's GP has completed this form, GP must sign below:	Official Stamp Required:
Name of GP:		
GP's signature:		
Date:		
IMC Number:		

Official Stamp Required: This form must be stamped. If a stamp is not available, this form must be accompanied by a business card OR headed paper.