



Application for Public Post-Secondary Loan (PPL) Services

Section 1: Applicant Information		
Applicant Last Name <input type="text"/>		Date of Birth (MM/DD/YYYY) <input type="text"/>
Applicant First Name <input type="text"/>	Initial <input type="text"/>	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Not specified
Street Address <input type="text"/>		Name of School <input type="text"/>
City/Town <input type="text"/>	Postal Code <input type="text"/>	Campus <input type="text"/>
Email <input type="text"/>		Program of Studies <input type="text"/>
Telephone <input type="text"/>		Program Start Date (MM/DD/YYYY) <input type="text"/>
Section 2: Eligibility Criteria		
Applicant is a resident of BC: ➡ <input type="checkbox"/> Yes <input type="checkbox"/> No		
Applicant is legally able to work in BC: ➡ <input type="checkbox"/> Yes <input type="checkbox"/> No		
Applicant is already receiving services through a <i>Ministry of Social Development & Social Innovation</i> or any other employment program? ➡ <input type="checkbox"/> Yes <input type="checkbox"/> No		
↳ If yes, indicate name of Program/Service Provider: ↴ <input type="text"/>		
Applicant is eligible for a 3rd party claim for the disabling condition (e.g. ICBC, WorkSafe, private insurance): ➡ <input type="checkbox"/> Yes <input type="checkbox"/> No		
↳ If yes, indicate name of Service Provider: <input type="text"/>		
Applicant is employed while attending school ? ➡ <input type="checkbox"/> Yes <input type="checkbox"/> No		
Section 3: Disability Coordinator		
I certify the above student is registered in the school indicated in Section 1. The information provided herein is true and correct to the best of my knowledge and understanding. I have included supporting documentation describing to the student's permanently disabling condition(s). ¹		
DC Signature		Print name
Date	Tel.	Email

¹ Applicant's medical documentation must indicate a permanent disability or a chronic medical condition that is expected to persist for 2 or more years and is the primary barrier to employment and/or training.



Section 4: PPL Conditions of Equipment Loan

The personal information requested on this form is collected under the authority of Section 26 (c) of the Freedom of Information and Protection of Privacy Act and is subject to all of the provisions of that Act. The information collected will be used by the Ministry of Social Development and Social Innovation ("the Ministry"), its service providers, and associates of those service providers in order to administer the Public Postsecondary Loan (PPL) program. If you have any specific questions concerning the collection, use, or disclosure of personal information please contact the Ministry.

Application and Service Provision

- I. I understand that:
a) I am applying for services and/or assistive technology equipment under the publicly funded PPL program.
b) It is my responsibility to ensure that the information on this application and in all the documents related to it is accurate and true.
c) It is against the law to make false or misleading statements on this application and/or in any of the documents forming part of it.
d) If I do not provide complete and accurate information, or if I obtain or attempt to access services by fraudulent means, I may not receive PPL services/equipment now or in the future.
e) The Ministry and Assistive Technology British Columbia (ATBC) may need to collect, use, and disclose information about me in order to determine my eligibility for PPL services, make assistive technology recommendations, and/or clarify information contained in the documentation I submitted in support of my application.
f) My medical professional and my school may disclose relevant information to the Ministry and ATBC regarding my disability, access requirements, and/or academic standing for the purposes of verifying information pertaining to this application and determining my eligibility.

Terms of Participation

- II. If I am accepted to participate in the PPL program:
a) I will exercise due care of any and all items loaned to me. I will not install, or allow to be installed, any software or hardware that interferes with the intended purpose of my technology loan plan.
b) I will immediately report all technology problems requiring repair services to ATBC so that repairs can be performed by an ATBC authorized technician. I will not be reimbursed for any repairs performed by unauthorized personnel and I may be invoiced for replacement or for any additional repairs that are required due to damage caused by negligence, unauthorized tampering, and/or attempts at repair.
c) I will advise ATBC if I change school or residence. I agree to return the equipment to ATBC when I no longer need the equipment, when I no longer meet the PPL eligibility criteria, and/or if ATBC requests its return.

I have reviewed the statements above, and the ATBC-Client Community Expectations policy, and agree with the terms and conditions listed. I understand that any technology loaned to me through PPL is intended for my sole use and for the purpose of mitigating the impact of my disability on my studies, and must be returned to ATBC promptly upon request.

Applicant signature

Date

2 PPL eligibility requires that you enroll in 2 or more classes per semester and make satisfactory progress in your courses.



ATBC-Client Community Expectations

ATBC is committed to supporting the educational goals of postsecondary students with disabilities. We believe that a safe and respectful working environment is integral to this commitment and that the high quality of services expected by our clients and partners can only be achieved by promoting the health and well-being of ATBC's entire service community. As such, you can expect that ATBC staff will conduct their business professionally and in a manner that promotes collaboration and mutual dignity for its staff, clients, and partners.

As a valued participant in ATBC's community of services, we also expect you to behave in a manner consistent with *mutual respect for the dignity, rights, responsibilities, and well-being of our other participants, partners, staff, and property*. In addition, we expect that you will use and maintain any materials, computers, equipment and other items provided to you by ATBC with respect and care.

Although in our experience poor conduct is exceptionally rare, ATBC holds a “zero tolerance” approach to harassment and bullying. In the unlikely event that a participant chooses to engage in inappropriate or harmful behaviour within the ATBC service community, and refuses to modify that conduct, he or she may be temporarily or permanently disqualified from further participation in service programs administered by ATBC, or accessing services normally provided by ATBC. In addition, and depending upon the nature and severity of the breach, ATBC may implement cost-recovery measures and/or other legal remedies.

By arranging to enter into a service relationship with ATBC, you signal your acknowledgement of the contents and spirit of this *Community Expectations* document and agree to participate in a manner that is consistent with the expectations outlined above. **If you do not agree to abide by these service expectations, you should decline our invitation to enter into a service relationship with ATBC.**

RETAIN THIS PAGE FOR YOUR REFERENCE