

## Appendix C – FES-UA New Student Application Checklist



### Proof of Child's Age

Birth Certificate, if unavailable, a passport or, in some cases, the foster care placement documentation can be provided for review.

### Proof of Disability (listed in the parent handbook, [here](#))

A Physician, psychologist or an autonomous APRN diagnosis must include the following\*:

- Student's full name
- Physician, psychologist, or Autonomous APRN name and license number
- One of the following diagnoses:
  - Anaphylaxis
  - Autism spectrum disorder
  - Being a high-risk child
  - Cerebral Palsy
  - Down syndrome
  - Emotional or a behavioral disability
  - Hearing impairment, including deafness
  - Hospital or homebound (IEP is required)
  - Identification as dual sensory impaired (IEP is required)
  - Intellectual disability (severe cognitive impairment)
  - Language impairment
  - Muscular dystrophy
  - Orthopedic impairment
  - Other health impairment
  - Phelan-McDermid syndrome
  - Prader-Willi syndrome
  - Rare diseases (defined by NORD and NIH/GARD)
  - Specific learning disability
  - Speech impairment
  - Spina bifida
  - Traumatic brain injury
  - Visual impairment, including blindness
  - Williams syndrome

\* If a student has a diagnosis that falls under one of the above categories, the physician must include the broader category listed above within the diagnosis description to be acceptable.

or

Individualized Education Plan that must include the following:

- Student's full name
- Public school name
- Initiated within 3 years of the scholarship application submission date
- IEP duration longer than 6 months (for Hospital or Homebound diagnosis).

### Proof of Residency

Driver's license must include the following for either the primary or secondary parent:

- Parent's full name
- Florida address
- Current as of the scholarship application submission date
- Issued on or after January 1, 2010

or

Utility bill must include the following for either the primary or secondary parent:

- Parent's full name
- Florida service address
- Dated within 60 days of the application submission date

### Sworn Compliance Statement

Found within the online application.