



National Student Financial Aid Scheme

YOUR ID NUMBER

Grid for ID number

Disability Annexure A

DISABILITY ASSESSMENT QUESTIONNAIRE

Applicants who are currently receiving the funding for students with disabilities do not need to submit this Annexure...

Please complete in detail, in legible handwriting with certification and verification by a registered healthcare professional or disability support office...

FIRST NAMES (in full, as per your ID document)

Grid for first names

SURNAME (as per your ID document)

Grid for surname

Disability information:

(This section could be completed by a certified, professionally registered medical doctor or other appropriately qualified professional viz. optometrist, physiotherapist, disability unit head)...

Please indicate the type of disability in the section below. See the table overleaf for information and explanation of the disabilities.

(please mark with an X)

Table with 6 columns: Blind, deaf, Deaf-Blind, Hearing Impaired, Physical Disability, Neurodevelopmental Disabilities, Chronic Illness, Deaf, Hard of Hearing, Partially-Sighted, Psychosocial Disabilities, Any other Disability

Please provide further details if you have a disability not mentioned above: (Please give detailed explanation and provide a medical report from a medical practitioner)

Large text box for further details

Psychosocial and neuro-developmental disability - please describe the nature of the support required (a detailed report, not older than 3 years from a registered Psychologist or Psychiatrist will need to be provided to support this application).

Large text box for psychosocial and neuro-developmental disability

Chronic Illness - please describe the nature of the support required by the student (a detailed recent medical report from a registered medical practitioner will need to be provided to support this application explaining how the condition impacts on the teaching and learning process of the student).

Large text box for chronic illness

Details of Practitioner: (if completed by the Disability Unit, this form must be completed by the Head of the Unit. The additional medical reports required must accompany this form where appropriate)

Large text box for details of practitioner

Please give details as to how the support requested will benefit the student (this section to be completed by the DU):

Large text box for support benefits

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

DATE
------

SIGNATURE	
-----------	--

ORGANISATION STAMP
--------------------

Washington Group	Category of Disability	Description Of Disability
Sensory Disability	<b>Blind</b>	No functional vision
	<b>Partially-sighted</b>	Functional vision with limitations that may be reduced through the use of electronic or manual low-vision devices. (Vision cannot be fully corrected through the use of prescriptive lenses)
	<b>Deaf (capital D)</b>	Little or no hearing: generally makes use of South African Sign Languages (SASL) and typically subscribes to Deaf Culture
	<b>deaf (lower case d)</b>	Little or no hearing, do not make use of Sign language as a medium of communication, makes use of various means of communication such as speech, speech reading/cochlear implants or a combination of these. Aligns with impairment/disability and the hearing world.
	<b>Hearing Impaired</b>	None, little or some hearing: generally makes use of appropriate hearing technology e.g. Cochlear Implants, Hearing Aids, and other assistive listening/living devices and typically uses verbal communication. Align themselves with impairment and the hearing world.
	<b>Hard of Hearing</b>	Persons with different degrees of hearing loss, who do not align with impairment and disability.
	<b>Deaf-Blind</b>	No functional vision and no hearing
Specific Learning / Developmental Disability	<b>Neurodevelopmental Disabilities</b>	Intellectual Disabilities Communication Disabilities, Language and Speech Disability (e.g. stuttering), Autism Spectrum Disorder, Attention Deficit/Hyperactivity Disorder (ADHD), Specific Learning Disabilities
Psychosocial / Psychiatric Disabilities	<b>Psychosocial Disability</b>	Such as Depression, Schizophrenia
Physical Disability	<b>Physical Disability</b>	Loss of a limb or makes use of crutches, Wheelchair User, Person with Cerebral Palsy
	<b>Chronic Illness</b>	A long standing medical condition /illness that affects daily functioning. Such as Chronic Heart Condition, Chronic Diabetes Cancer
Any disability not mentioned above	<b>Give details</b>	Any disability not mentioned above
Physical Disability of a Temporary Nature	<b>Temporary Disability: disability not longer than 6 months</b>	Physical Disability of a Temporary Nature



Call NSFAS on 0860 067 327

You may also visit your nearest university/TVET college financial aid office for assistance.

For information on where to drop your form, please contact NSFAS or the NYDA head office on 0800 52 52 52

NYDA Thulamela Branch	Thulamela Information Center, Punda Maria Road, Thohoyandou, 0950
NYDA Bloemfontein Branch	GF Shop 125, Sanlam Plaza, Cnr Maitland and East Burger Street, Bloemfontein, 9301
NYDA Cape Town Branch	Shop P 18a Piazza (Landmarks: African Bank & Sanlam), Golden Acre, Adderley Street, Cape Town
NYDA Durban Branch	Ground Floor, Smart Exchange Building, 5 Walnut Road (Cnr. Dr. AB Xuma) , Durban 4001
NYDA East London Branch	31 Malcomess Park, Crn St Georges & Gately Street, Spar Complex, Southernwood, 5201
NYDA Johannesburg Branch	17 Diagonal Street, Old JSE Building, Ground Floor, Newtown, Johannesburg, 2001
NYDA Kimberley Branch	Old Telkom Building, 64-70 De Toit Span Building, Kimberley, 8300
NYDA Soweto Branch	2127 Old Potchefstroom Road, Klipspruit, Soweto, 1809
NYDA eMalaheni Branch	Shop 3 Pavillion Centre 19 - 21 Botha Avenue, Witbank, 1035
NYDA Mbombela Branch	Office No 8, Imbizi place, Samora Machele Drive, Mbombela
NYDA Rustenburg Branch	39 Heystek Street, Next to SARS, Rustenburg, 0299
NYDA Polokwane Branch	60 Schoeman Street, Shop 10, Crescent Building, Polokwane, 0699
NYDA Port Elizabeth	Kwantu Towers, Ground Floor, Govan Mbeki Avenue, Vuyisile Mini Square, Port Elizabeth, 6001
NYDA Secunda Branch	Shop no 2, Game Park Centre, Horwood Street, Secunda, 2302
NYDA Tshwane Branch	429 Shoburg Building, Stanza Bopape Street