

## CERTIFICATION OF RETAINED FUND BENEFICIARY ELIGIBILITY »

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This is to certify that [BeneficiaryName] \_\_\_\_\_ is eligible to be a Beneficiary of funds from the Wispect Retained fund administered by [AgencyName], and that [AgencyName] has retained the documentation required below in its files.

Signed on behalf of [AgencyName] by: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

### Required Documentation in Agency Files

A person is eligible to be a Beneficiary of funds from the Wispect Retained fund if he or she meets the Retained Fund definition of an individual with a disability. The Retained Fund defines individual with a disability as an individual who has a medically determinable mental or physical impairment that substantially limits one or more of the following major life activities:

1. self-care;
2. receptive and expressive language;
3. learning;
4. mobility;
5. self-direction;
6. capacity for independent living; and
7. economic self-sufficiency.

Documentation in [AgencyName]'s files that an individual meets the Retained Fund definition of an *individual with a disability* and is eligible to be a Beneficiary of funds from the Wispect Retained Fund may consist of any of the following (check those that apply):

\_\_\_\_\_ Documentation that [AgencyName] has determined that the individual is a recipient of Social Security Disability Insurance benefits, SSI or Medicaid based on disability.

\_\_\_\_\_ Documentation that [AgencyName] has determined that the individual is a participant in the Children's Long-Term Support Waiver, Family Care, IRIS or Partnership programs.

\_\_\_\_\_ Self-certification, signed by the named individual or guardian that the individual meets the definition of *individual with a disability*.

\_\_\_\_\_ An internal determination by [AgencyName] that the individual meets the Retained Fund definition of an *individual with a disability* based on information from medical or therapy providers, information from the assessment portion of an IEP, or other similar documentation.