

## CERTIFICATION OF DISABILITY »

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\_\_\_\_\_ is a possible Beneficiary of funding from the Wispect Retained Fund that is being applied for the benefit of individuals with disabilities by \_\_\_\_\_.

This is to certify that \_\_\_\_\_ meets the definition of an individual with a disability, as defined for purposes of the Wispect Retained Fund. \_\_\_\_\_ has a medically determinable mental or physical impairment that substantially limits one or more of the following major life activities (initial all that apply):

\_\_\_\_\_ self-care;

\_\_\_\_\_ receptive and expressive language;

\_\_\_\_\_ learning;

\_\_\_\_\_ mobility;

\_\_\_\_\_ self-direction;

\_\_\_\_\_ capacity for independent living; and

\_\_\_\_\_ economic self-sufficiency.

Signed by \_\_\_\_\_, Representative or other person with knowledge:

\_\_\_\_\_

Name:

Relationship:

**Attach Documentation.** Documentation of a formal Disability Determination from the Disability Determination Bureau for purposes of Social Security, SSI or Medicaid will establish eligibility, but is not a requirement.

Proof of disability for Retained Fund distributions may consist of medical or therapy records, a doctor's letter, the assessment portion of an IEP, proof of receipt of SSDI; proof of receipt of Medicaid based on disability or blindness; participation in Children's Long-Term Support Waiver, Iris, or Family Care; or (if under age 65) proof of receipt of Medicare or SSI. Other similar proof may be acceptable if it shows existence of an impairment and limitation of a major life activity.

