

## **CAPER-BC Application Form**

User Information			
Name			
Ivaille	Last	First	Middle Initial
Phone		Email	
Institution		Advisor	
City		PEN	
Major / Area	of Study	Pé	ersonal Education Number
	Request for Release of F	ersonal l	Information
I understand that personal information provided to Centre for Accessible Post-secondary Education Resources BC (CAPER-BC) is collected, used, disclosed and protected in compliance with the B.C. College and Institute Act and the B.C. Freedom of Information and Protection of Privacy Act.			
The information collected will only be used for the consistent purpose of fulfilling the requirements of the operation of CAPER-BC. Uses include: contacting me directly regarding information services provided by CAPER-BC, disclosing to partner agencies that provide alternate formats or to service agencies that require validation in order to provide those services, and creating aggregate summary statistics. This disclosure may include access by funding agencies that require verification of status.			
I have read, understood and agree to the above statements.			
Signature			Date
	Advisor Info	rmation	
I agree that the student I am registering with CAPER-BC has a learning disability, visual impairment or other physical disability which limits their ability to effectively read standard print.			
Name			
	Last	First	Middle Initial
Advisor Signature		Date	
Please fill the next page and return the signed document to CAPER-BC.			

Fax: (604) 323-5544 Tel: (604) 323-5639

Email: caperbc@langara.bc.ca

Centre for Accessible Post-secondary Education Resources BC 100 West 49th Avenue Vancouver, BC V5Y 2Z6

## Check All That Apply (to be filled in by advisor with the student) Disability Visual Learning **Physical** Other (please explain) Memberships CNIB AT-BC PRCVI (past or present) Other (please explain) **Computer Use** Advanced Intermediate **Beginner** Device Access (Desktop Computer, Laptop, Tablet, or Smartphone) Own a device Have access to a device No access to a device Details (e.g. Windows 8, iPhone) Adaptive Technology Currently Using DAISY player / software Text to Speech software Magnifier Screen reader Learning Software Refreshable Braille display Other (please explain) Details (e.g. Kurzweil, VictorStream) **Internet Access Broadband access** Dialup access No access **Alternate Formats Used Previously** PDF **DAISY** Etext (Word, RTF, TXT) Large print Kurzweil **Tactile Graphic** Digital audio (MP3) Braille Other (please explain) **Preferred Alternate Formats** Etext (Word, RTF, TXT) **PDF DAISY** Large print Kurzweil **Tactile Graphic** Digital audio (MP3) Braille Other (please explain) Student requires more information. Please contact them. Please list any other relevant information, issues or concerns.