

Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities

2026-27 Application

Student Service Centre
1120 - 2010 12th Avenue
Regina, Canada S4P 0M3
306-787-5620
1-800-597-8278

If you are a student with either a permanent or persistent or prolonged disability enrolled in a program at an educational institution, you may be eligible to receive the [Canada-Saskatchewan Grant for Services and Equipment](#). This grant provides up to \$22,000 per program year to purchase specialized education-related services and assistive equipment. This includes up to \$20,000 for the Canada Grant and up to \$2,000 for the Saskatchewan Grant. The grant does not have to be paid back. If at any time you have questions, please contact the Students Service Centre at the phone number provided on this application.

Eligibility

To be eligible, you must:

- Have a permanent disability defined as:
any impairment, including physical, mental, intellectual, cognitive, learning, communication or sensory impairment – or a functional limitation – that restricts the ability of a person to perform the daily activities necessary to pursue studies at a post-secondary school level or to participate in the labour force and that is expected to remain with the person for the person's expected life; OR
Have a persistent or prolonged disability, as defined as:
any impairment, including a physical, mental, intellectual, cognitive, learning, communication or sensory impairment – or a functional limitation – that restricts the ability of a person to perform the daily activities necessary to pursue studies at a post-secondary school level or to participate in the labour force and has lasted, or is expected to last, for a period of at least 12 months, but is not expected to remain with the person for the person's expected life.
- Be enrolled in a full-time or part-time program at a designated post-secondary institution.
- Have financial need. This is determined by submitting a separate application for student aid.
- Provide written confirmation of the exceptional education-related services or equipment you need.
- Provide proof of either a permanent or persistent or prolonged disability by having your doctor fill out the [Verification of Disability form](#). As an alternative, the doctor can provide a medical certificate describing the functional limitations of your disability and whether it is expected to be either a permanent or a persistent or prolonged disability.
- Students with a learning disability are to obtain a Learning Disability Assessment (i.e., psycho-educational assessment) which was completed when you were 18 years or older or when you were in high school, and is no older than 7 years.
- If you have previously provided proof or verification of your disability, you do not have to provide this documentation again. Students with persistent or prolonged disabilities are required to self-declare/attest their disability status on the student aid application form every year to maintain access to student aid benefits.
- Have no outstanding receipts from previous services and equipment grant funding.

The Verification of Disability form may be accepted from other medical practitioners that are suitably trained or authorized. Please contact the Student Service Centre for more information.

Alternative forms of the signatures will be accepted from medical practitioners, students, disability officers or administrative officials as required. This includes, but is not limited to, electronic signatures or official watermarks and stamps.

It is recommended that students with learning disabilities obtain a psycho-educational assessment to verify their disability. While a current psycho-educational assessment (or summary report) is preferred, if a student is unable to submit a new or updated assessment, the following may be accepted:

- a) a psycho-educational assessment no older than seven years for students who had these assessments completed before the age of 18; OR
- b) a medical certificate (or letter) in lieu of a psycho-educational assessment (or summary report) for students without an existing assessment and who cannot receive an assessment in time for verification of their application.

This certificate must be completed by a registered psychologist or qualified medical practitioner.

How to Apply

Before applying for the Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities (CSG-DSE), talk to the disability advisor at your educational institution and/or recognized disability organization (e.g., the CNIB, Neil Squire Society, the Saskatchewan Deaf and Hard of Hearing Services or the Learning Disabilities Association). The advisor will help with the application process.

The Student Service Centre must receive your application and all supporting documentation, including prior service and equipment receipts, at least 30 days before the end of your study period. It is recommended you start the application process at least two months before your classes start.

Grant applications will not be approved if there are outstanding receipts from previous services and equipment grant. Any unused portion of the grant must be refunded to the Student Service Centre, Ministry of Advanced Education. Payment methods include e-transfer, cheque or money order, made **payable to the Student Aid Fund**.

The following information is needed to process your application:

1. **Confirmation of Enrolment** form for the period of study identified for this school year. This form needs to be filled out by someone at your school (i.e. Registrar's Office) authorized to confirm your enrolment.
2. **Confirmation of Need** form for all disability related services and/or equipment, including an estimate of what it will cost for these services and/or equipment. This is completed by your school's disability advisor and/or a recognized disability organization. They can also direct you to an appropriate equipment supplier to get the estimate/quote for the specialized equipment requested.

The grant must only be used for the services and/or equipment specified in your approval letter. Any changes you would like to make to services and equipment or requests for additional funds must be submitted through your disability advisor.

To ensure academic integrity and to avoid conflicts of interest, service providers funded through the grant/CSG-DSE cannot be related to the student and cannot be employed by the student's institution. Examples of persons that cannot be service providers for grant/CSG-DSE purposes include the student's parent(s), step-parent(s), sibling(s), aunt(s), uncle(s), student's instructor(s), etc.

Other service providers who have a close personal relationship with the student may also be considered to be a conflict of interest (e.g., neighbour, close family friend, etc.). Disability Officers/Advisors for Students with Disabilities are asked to use their professional judgement when approving service providers who have a close personal relationship with the student."

Submission of Receipts

Please send copies of the receipts for the approved items you purchased directly to the Student Service Centre, Ministry of Advanced Education through the “uploader feature” in your [Advanced Education Student Portal](#) account.

If you do not have an existing Advanced Education Student Portal Account, or you need to upload documents on behalf of the applicant, upload your application, supporting documents and receipts online using the [Post-Secondary Document Uploader](#). You can also send by mail at the address below.

Submit the receipts for the services and/or equipment as soon as you receive them or by the end of your study period. Detailed receipts may include a copy of an invoice marked “paid”, a copy of a cash register or other receipt that clearly names the product purchased.

The [Receipt of Support Services](#) Form must be used to keep track of the service hours and costs such as, Tutor, Note-taker, Exam Supervisor/Proctor and other services. Submit this form along with the receipts. Students are strongly encouraged to submit this application form and necessary receipts **as soon as possible**. This helps students avoid misplacing receipts and may reduce processing delays.

Important: Future grant applications will not be approved if there are any receipts that have not yet been submitted from previous grants. Any unused portion of the grant must be refunded to the Student Service Centre, Ministry of Advanced Education. Payment methods include e-transfer, cheque or money order, made payable to the Student Aid Fund (see [Submission of Documents](#) for address).

If you would like other individuals (e.g., parent, spouse, or guardian) to call or inquire on your behalf about your account, you will need to complete the [Consent to Release Information Form](#).

3. Proof of Either a Permanent OR a Persistent or Prolonged Disability.

Students must provide a document or documents that demonstrate that the student has either a permanent OR a persistent or prolonged disability. Eligible documents include but are not limited to:

- ☐ Proof of disability from your doctor. Have them fill out the [Verification of Disability form](#). As an alternative, the doctor can provide a medical certificate describing the functional limitations of your disability and whether it is expected to be permanent OR persistent or prolonged.

or

- ☐ Learning Disability Assessment (i.e., psycho-educational assessment) which was completed when you were 18 years or older or when you were in high school, and is no older than seven years.

or

- ☐ Documentation proving you receive federal or provincial disability assistance.

Some doctors may charge a fee to fill out your forms related to verifying your disability. Students with a confirmed disability may be reimbursed for disability verification costs, including assessments fees, completion of medical forms or documentation by a qualified medical practitioner. Students may be eligible for reimbursement under the Grant for Services and Equipment, once the disability is confirmed. Students may wish to work with their institution’s disability advisors to determine what type of verification or assessment is needed and how best to arrange for the assessment.

It is recommended that students with learning disabilities obtain a psycho-educational assessment (or summary report) to verify a disability and accommodation details for post-secondary education.

Submission of Documents and Receipts

Please submit the application and all documents and receipt copies through the “uploader feature” in your [Advanced Education Student Portal](#) account.

If you do not have an existing Advanced Education Student Portal Account, or you need to upload documents on behalf of the applicant, upload your application, supporting documents and receipts online using the [Post-Secondary Document Uploader](#). You can also send by mail to the address below:

Mailing Address: Student Services Centre, Disability Unit
 1120 - 2010 12th Avenue
 Regina, Saskatchewan S4P 0M3

Telephone: In the Regina area: 306-787-5620
 Outside Regina: 1-800-597-8278
 Outside Canada: 306-787-5620

Email: disabilityincoming@gov.sk.ca

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Student Information

(to be completed by the student)

Full Name: _____

Social Insurance Number: _____

Date of Birth (dd/mmm/yyyy): _____

Mailing Address (all documentation will be sent this address):

Apartment No.	Street/Box No.	City/Town	Province	Postal Code
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Telephone :	Email:
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Disability Information

Check the box that describes the nature of your disability:

- ☐ Mobility
- ☐ Hearing
- ☐ Visual
- ☐ Speech
- ☐ Acquired Brain Injury
- ☐ ADD/ADHD
- ☐ Pervasive Developmental Disorder (e.g., autism, neurological)
- ☐ Psychiatric or Psychological
- ☐ Learning - students with this type of disability are to submit a Learning Disability Assessment (e.g., psycho-educational assessment) which was completed when you were 18 years or older or when you were in high school
- ☐ Other, please specify:

Declarations, Agreements, Acknowledgements, and Consents

I declare that all the information provided is, to the best of my knowledge, correct and complete as of the date of signing.

I agree to promptly notify the Ministry of Advanced Education in writing of any changes, including but not limited to my name, address, educational institution, and course load, as they occur.

I agree to provide the Ministry of Advanced Education copies of receipts showing the money I have spent for my exceptional education-related expenses that were approved. I also agree to give these receipts to the Ministry by the end of my study period, or sooner for verification and audit purposes.

I agree to pay back the Ministry of Advanced Education the unspent funding for exceptional education-related items not purchased.

I acknowledge that in order to qualify for the Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities I am responsible to obtain Confirmation of Enrolment, written Confirmation of Need for exceptional education-related services and equipment, and proof of my disability from a qualified practitioner. I acknowledge that I am responsible for any fees charged by the medical doctor or qualified practitioner to complete the Verification of Disability form or a Learning Disability Assessment for learning disabilities.

I further acknowledge that the information provided by my medical doctor or qualified practitioner on the Verification of Disability form or Learning Disability Assessment for students with learning disabilities will be used for assessing my eligibility for Canada-Saskatchewan Student Financial Assistance (student loans and grants) for students with disabilities.

X _____
Signature of Student

Date (dd/mmm/yyyy)

I consent to my school, my school's disability advisor or other designated official of my school to collect, use and disclose my personal information as defined in *The Freedom of Information and Protection of Privacy Act* and any personal health information as defined in *The Health Information Protection Act* to the Ministry of Advanced Education, Government of Saskatchewan for the purpose of assessing eligibility, administration, research and evaluation for the Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities.

I consent to the Ministry of Advanced Education, Government of Saskatchewan to collect use and disclose my personal information as defined in *The Freedom of Information and Protection of Privacy Act* and any personal health information as defined in *The Health Information Protection Act* to my school, my school's disability advisor or other designated official of my school or to the Government of Canada for the purpose of assessing eligibility, administration, evaluation and research for the Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities.

I further consent to the Ministry of Advanced Education, Government of Saskatchewan to store my personal information as defined in *The Freedom of Information and Protection of Privacy Act* in the Government of Saskatchewan's Student Financial Assistance System and used for assessing eligibility, administration, research and evaluation of the other financial assistance programs or benefits for which I may be eligible.

X _____
Signature of Student

Date (dd/mmm/yyyy)

Direct Deposit

I **authorize** direct deposit to the account designated below. I understand that the information provided will only be used by the Government of Saskatchewan for the purpose of processing payments for the Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities.

Please do 1 or 2: (1 is preferable, unless you do not have a blank cheque).

1. Attach a current blank cheque or photocopy marked "VOID". Your name and address should be pre-printed on the cheque.
2. Provide the following information about your bank account:

ATTACH A VOID CHEQUE OR COMPLETE THE BANKING INFORMATION AREA BELOW (SEE EXAMPLE)
If you require assistance completing the bank information, please contact your financial institution.

BANK INFORMATION (ELECTRONIC FUNDS TRANSFER)

Branch number (5 digits)	Inst. number (3 digits)	Account number
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Full name, address, and telephone number of bank:

EXAMPLE:

Name / Nom P.O. Box / C.P. 000 City / Ville, Canada H0H 0H0	Example / Exemple	Cheque No. N° de chèque 0000000
Pay to the order of Payez à l'ordre de	<i>"Void"</i> <i><<Null>></i>	\$ _____ Dollars
Signature		
1 2 3 4		

1. Cheque number - not required
2. Branch number - 5 digits

3. Institution number - 3 digits
4. Account number - as shown on cheque

Note: Your grant will be transferred directly to this bank account if you qualify.

Name of Student: _____

X _____

Signature of Student

_____ Date (dd/mmm/yyyy)

Confirmation of Need

(to be completed by the educational institution's Disability Advisor and/or a Disability Organization, e.g., CNIB)

Student's Full Name: _____

Program Name: _____

Name of Institution: _____

Nature of Disability: _____

Has this student received the Canada-Saskatchewan Grant for Services and Equipment in the past? ☐ Yes ☐ No

If yes, please ensure the student has submitted all the receipts for the services/equipment purchased. This application cannot be processed until this requirement is met.

Service Request

Provide the type of service(s) requested and the estimated cost:

✓	Service	Total Cost Amount per hour, multiplied by hours per week, multiplied by number of weeks.	Amount Requested
☐	Note taker		\$
☐	Reader		\$
☐	Peer Tutor Up to a maximum of \$25/hour For tutor rates more than \$25/hr the tutor's resume is required		\$
☐	Specialized Tutor Up to a maximum of \$60/hour		\$
☐	Proctor/Exam Supervisor		\$
☐	Interpreter/Captioning/ Oral Sign/Cart		\$
☐	Other (please specify):		\$
Service Total			\$

Equipment Request

Provide a list of all equipment, assistive software, and technical aids requested and the cost:

Equipment Attach copies of the estimates/quotes for each requested item.	Amount Requested
	\$
	\$
	\$
Equipment Total	\$

Summary of Services and Equipment

Service Total	\$
Equipment Total	\$
TOTAL REQUESTED	\$

Disability Advisor Name: _____

Telephone: _____ Email: _____

I declare that the information provided on this form is, to the best of my knowledge, correct and complete and I understand that this information will be used for the purposes of assessing eligibility, administration, research and evaluation for the Canada-Saskatchewan Grant for Services and Equipment for Students with Disabilities.

X _____
Signature of Disability Advisor

Date (dd/mm/yyyy)