

**FORM # 11 – EDUCATION ALLOWANCE - SPECIAL EDUCATION REQUIREMENTS**

|            |              |              |
|------------|--------------|--------------|
| <b>SN:</b> | <b>RANK:</b> | <b>NAME:</b> |
|------------|--------------|--------------|

|  |                     |                      |                                |              |
|--|---------------------|----------------------|--------------------------------|--------------|
|  | National<br>Défense | Défense<br>nationale | <b>GENERAL ALLOWANCE CLAIM</b> | VOUCHER NO – |
|--|---------------------|----------------------|--------------------------------|--------------|

|   |            |
|---|------------|
| NOTE: THE USE OF THIS FORM IS RESTRICTED TO ONE KIND OF ALLOWANCE PER SHEET AND IS NOT TO BE USED FOR ALLOWANCES FOR WHICH FORMS HAVE ALREADY BEEN PROVIDED | BATCH NO – |
|---|------------|

**FORM # 11 – EDUCATION ALLOWANCE - SPECIAL EDUCATION REQUIREMENTS**  
*EFFECTIVE 01 AUGUST 2010*

|   |                             |              |
|---|-----------------------------|--------------|
| UIC/UNIT:   | SY 1 SEPTEMBER              | TO 31 AUGUST |
| EMAIL:  | COS DATE:                   | TED DATE:    |
| STUDENT NAME:   | DATE OF BIRTH (dd/mm/yyyy): |              |
| REFERENCES: <a href="#">FSD 34.12</a> , <a href="#">How To Book – Part VI</a> |                             |              |

|   |                     |
|---|---------------------|
| <b>Name/address/telephone number of School attending:</b> | <b>SCHOOL GRADE</b> |
|---|---------------------|

**Benefit**

1. Education Allowance to assist with costs associated with Special Education Needs where, in exceptional situations, a dependent student has special education needs as a result of a physical disability, special learning needs or gifted learning needs and such needs have been documented by appropriate professionals, will be based on programs normally provided without charge by the Ontario Ministry of Education and the Ministry of Social Services. It is the responsibility of the member to provide documentation in support of the special education allowance, such as, but not limited to, an assessment and recommendation of appropriate professionals to NDHQ/DGCB/DEM for submission to the appropriate foreign interdepartmental co-ordinating committee.

**Entitlement**

2. Education Allowance for Special Needs in addition to school fees.

**Certification by the member**

3. School authorities have done an assessment/evaluation and provided a professional recommendation; I request funding be provided to satisfy special education needs.

4. Submission to NDHQ/DGCB to include:  
 recommendation letter from the appropriate school authority; and  
 recommendation letter from the appropriate professional authority;  
 source and qualifications of remedial assistant;  
 funding from my Health Insurance Plan has been expended.      Yes      No  
 Copy of the student’s Individual Education Plan (IEP), Individual Program Plan (IPP) or modified education program followed in Canada (if applicable)  
 Copy of “Education Screening for a Posting Outside Canada Questionnaire on Educational Performance of Dependants” must be included with this submission before it can be processed

5. Number of hours required                      for remedial assistance and cost                      per hour. This is required before an allowance can be set.

6. I accept this Education Allowance for Special Education Needs on condition that I may be required to present proof that services requested paragraph 4 have taken place in the event of an audit. Such documentation should be kept for a period of 7 years to satisfy audit requirement.

Fee schedule for current school year enclosed.

Instructions to Complete Special Education – Schooling at the Post Form read and Allowance parameters understood.

[Instructions to Complete Special Education - Schooling at the Post Form](#)

|                     |       |
|---------------------|-------|
| Member’s signature: | Date: |
|---------------------|-------|

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**Outside Canada Approving Authority Office use only.**

- Verified by Education Clerk that allowance as requested is within entitlement**
- Applicable article in the Outside Canada Education of Children “How To” Book

Only admissible expenses listed in FSD 34 are being recommended for approval.

Verified and Recommended by Approving Authority:

Date:

Upon approval from NDHQ, Outside Canada Support Unit is to provide the member with an authorized copy of this allowance.

**NDHQ Approval and Certified pursuant to Section 34 of the FAA Block**

**DEM Case #:**

EDUCATION ALLOWANCE FOR SPECIAL EDUCATION NEEDS \$  
APPROVED.

IN LOCAL CURRENCY IS

- Only admissible expenses listed at FSD 34 are being approved.

**NDHQ Approving Authority Signature:**

**Date:**

Approving Authority is to provide the member with an authorized copy of this allowance.

**Financial Coding: GL: 1211, Cost Centre: 2202ZF, Fund: C103, IO: GRC0000B3207**

Civilian Personnel Financial Coding: Contact DGCB/DEM

MSGU Financial Coding: CC: 2300AQ Fund: C117 GL 1211 IO:

**(For FMAS Purposes, the text description line must show: Unit UIC, last three digits of SN and member's last name)**

Received amount of                      Currency                      Exchange Rate used                      CHEQUE NO.

Claimant's Signature    Date    Cashier's Initials