

Disability Tax Credit Questionnaire

Please note your child's doctor will determine whether the restrictions listed are sufficient to qualify for an application for a Disability Tax Credit. They may or may not include all categories and examples you have provided on the final form.

- Speaking** – Marked restriction means the child must rely on other means of communication, such as sign language or a symbol board, at least 90% of the time.

Please provide examples of how your child is restricted in speaking to this degree:

- Elimination** – Marked restriction means the child is unable to personally manage bowel/bladder functions despite being of an age when they should be able to do so. Example: Incontinent of bladder functions at least 90% of the time.

Please provide examples of how your child is restricted in elimination to this degree:

- ❑ Dressing – Marked restriction means your child cannot dress without daily help from another person despite being of an age when they should be able to do so independently . Example: Child cannot dress themselves at all without adult assistance at least 90% of the time.

Please provide examples of how your child is restricted in dressing to this degree:

- ❑ Mental functions – Marked restriction means your child needs daily support and supervision (to a marked degree beyond that expected for their age) for tasks of everyday life at least 90% of the time. Examples: Child cannot complete a basic age-appropriate transaction independently, is unable to express his/her needs or anticipate consequences of behaviour when interacting with others, is unable to remember basic information (eg name and address where age appropriate), is unable to solve problems, set and keep goals, make appropriate decisions and judgments in multiple areas of life at least 90% of the time

Please provide detailed examples of how your child is restricted in mental functions in multiple daily situations over 90% of the time to this degree:
