



Foundation for Blind Children
Arizona Instructional Resource Center
 1235 E. Harmont Drive, Phoenix, AZ 85020
 Phone: 602.337.8221 Fax: 602.678.5811

**CERTIFICATION OF ELIGIBILITY
 2010/2011**

I certify that

Student: _____ Grade: _____

School District: _____ School: _____

is blind or has a visual impairment that prevents him/her from using standard printed or non-printed instructional material. The student will be reading the requested files electronically, either with a text enlargement or with braille or auditory output. This also certifies that the printed instructional material is solely for use by the above-named student in connection with a course in which he or she is enrolled. No other person is entitled to the electronic files requested. Any copies made will be returned to the AIRC and deleted from all data storage devices as soon as the student no longer requires access to these files.

As required by the copyright law, the student's school/school district/LEA has purchased a copy of the printed instructional material for use by the above-named student.

Contact person for receiving the electronic file: _____

Phone and or email: _____

Shipping address and or email address to which files may be transmitted: _____

 _____ Zip: _____

Administrator's printed name and title: _____

Administrator's signature: _____ Date: _____