

# Medical Verification of Eligibility

handyDART Services



The purpose of this form is to obtain information about the applicant's physical and/or cognitive functional ability to use regular bus service. The Clerk Registrar at handyDART will use this information to assess the applicant's eligibility for handyDART.

All parts must be completely filled out and signed by a qualified health care or social services practitioner familiar with the applicant's mobility. A medical doctor, registered nurse, registered psychiatric nurse, occupational therapist, physical therapist, rehab practitioner or social worker can complete the form.

Please clearly describe the applicant's ability or inability to use the regular bus. An incomplete or unclear form will be returned.

Fees for completing this form are the applicant's responsibility.

Submit form to your local handyDART office.

For more information, contact your local handyDART office.

**Submitting a completed form does not guarantee eligibility.**

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## Applicant's Name

Last Name

First Name

Initial

Pursuant to the *Freedom of Information and Protection of Privacy Act* and the *BC Transit Act*, the information on this form is solely for use by BC Transit and its Agents to determine eligibility for custom transit services.

1. What disability conditions prevent the applicant from using regular bus service?

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2. How does this condition affect the applicant's ability in the following areas?

Please check each area as applicable.

- Permanent
- Walking/mobility
- Endurance
- Vision
- Memory
- Perceptual
- Behaviours
- Cognition
- Personal safety
- Other ( specify)

Temporary  
If temporary, for how long?

Explain:

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3. Does the applicant's disability or health condition prevent (as opposed to make difficult) use of low floor buses?

- Yes     No     Sometimes

Explain:

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4. When can the applicant use the bus?

Explain:

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5. Can the applicant:

- Make decisions about personal activities, care or finances
- Communicate or interact with others effectively
- Understand written and printed material
- Understand spoken word or auditory information
- Recognize landmarks
- Ask for directions
- Tell time
- Problem solve unexpected situations
- Safely cross the street
- Detect curbs and drop-offs
- See at night
- Walk up 3 steps (14 inches high) when handrails are available
- Walk down 3 steps (14 inches high) when handrails are available
- Walk as a pedestrian – max 3 blocks
- Walk as a pedestrian – max 2 blocks
- Walk as a pedestrian – max 1 blocks
- Wait at a bus stop while standing
- Wait at a bus stop while seated
- Plan a trip and travel alone outside the home
- Board a low floor bus (bus without steps) independently if the ramp is at curb level and handrails are available
- Stand on a bus while it is moving supported by a grab bar
- Travel on a bus when no transferring is required
- Travel in a bus when the bus stop is accessible
- Travel on the bus during non-rush hour traffic
- Travel on a bus with help (clarify from whom: bus operator, friend, etc.)
- Travel on the bus when the route is familiar
- Sit or rise, without assistance from another person, from a seat

Explain:

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6. Will the applicant require a mandatory attendant for behavioural or medical reasons when they are on the handyDART?  Yes  No

7. Can the applicant be left alone at their destination? \_\_\_\_\_  Yes  No  
Can the applicant be left alone at home? \_\_\_\_\_  Yes  No

Explain:

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8. Do you have any other comments?

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9. Did you complete any assessment or examination in order to determine this applicant's functional ability to take the regular bus?  Yes  No  Partial

Form completed by:

\_\_\_\_\_  
Last Name First Name Initial

\_\_\_\_\_  
Signature Date Phone

Relationship to applicant: \_\_\_\_\_

Professional qualifications: \_\_\_\_\_

How long have you (or your agency) been involved with the assessment of this person's health and disability condition? \_\_\_\_\_