

Document Type	Required Documents	Additional Info	Included
<a href="#">LSA Application Form</a>	<ul style="list-style-type: none"> <li>Signed consent must accompany all Applications</li> </ul>	<ul style="list-style-type: none"> <li>Consent form must be signed by Applicant or Guardian</li> </ul>	<input type="checkbox"/>
<b>Proof of Applicant's Identification</b>	<ul style="list-style-type: none"> <li>Copy must accompany all Applications</li> </ul>	<ul style="list-style-type: none"> <li>This can be a:                             <ul style="list-style-type: none"> <li><input type="checkbox"/> drivers licence</li> <li><input type="checkbox"/> passport</li> <li><input type="checkbox"/> birth certificate</li> </ul> </li> </ul>	<input type="checkbox"/>
<b>Injury Specific Evidence Required to support Application Process</b>			
<b>Amputation</b>	Signed <a href="#">LSA Medical Certificate</a> - completed by an appropriately qualified medical specialist relevant to the injury type.		<input type="checkbox"/>
<b>Blindness</b>	Signed <a href="#">LSA Medical Certificate</a> - completed by an appropriately qualified medical specialist relevant to the injury type.		<input type="checkbox"/>
<b>Brachial Plexus avulsion or rupture</b>	Signed <a href="#">LSA Medical Certificate</a> - completed by an appropriately qualified medical specialist relevant to the injury type.		<input type="checkbox"/>
<b>Brain Injury</b>	<ul style="list-style-type: none"> <li>Signed <a href="#">LSA Medical Certificate</a> - completed by an appropriately qualified medical specialist relevant to the injury type.</li> <li><a href="#">LSA FIM™ and WeeFIM® Assessment Scoresheet</a> completed and attached</li> </ul>	<p><b>For adults and children over 8 years of age:</b> A score of 5 or less on any item of the FIM™ due to the brain injury</p> <p><b>For children aged between 3 – 8 years:</b> A score 2 less than age norm on any item of the WeeFIM®</p> <p><b>For children under 3 years of age:</b> Medical certificate from paediatric rehabilitation physician or specialist stating probable permanent impairment due to brain injury resulting in significant adverse impact on their normal development</p>	<input type="checkbox"/>
<b>Burns</b>	<ul style="list-style-type: none"> <li>Signed <a href="#">LSA Medical Certificate</a> - completed by an appropriately qualified medical specialist relevant to the injury type.</li> <li><a href="#">Greenwood Scale Information Brochure</a> completed and attached.</li> </ul>		<input type="checkbox"/>
<b>Spinal Injury</b>	<ul style="list-style-type: none"> <li>Signed <a href="#">LSA Medical Certificate</a> - completed by an appropriately qualified medical specialist relevant to the injury type.</li> <li>Requires evidence of permanent neurological deficit required as evidenced by ASIA using ISNCSCI and/or ISAFSCI</li> </ul>	<ul style="list-style-type: none"> <li>American Spinal Injury Association (ASIA) scale impairment score conducted as part of an assessment using the International Standards for Neurological Classification of Spinal Cord Injury (ISNCSCI)</li> <li>and / or</li> <li>Residual significant impact on autonomic nervous system as evidenced using the 'International Standards to Document Remaining Autonomic Function after Spinal Cord Injury (ISAFSCI)</li> </ul>	<input type="checkbox"/>

\*Application Criteria may change from time to time and this checklist is based on the [Lifetime Support Scheme Rules 2018](#).

\*\* LSA medical certificate must be used