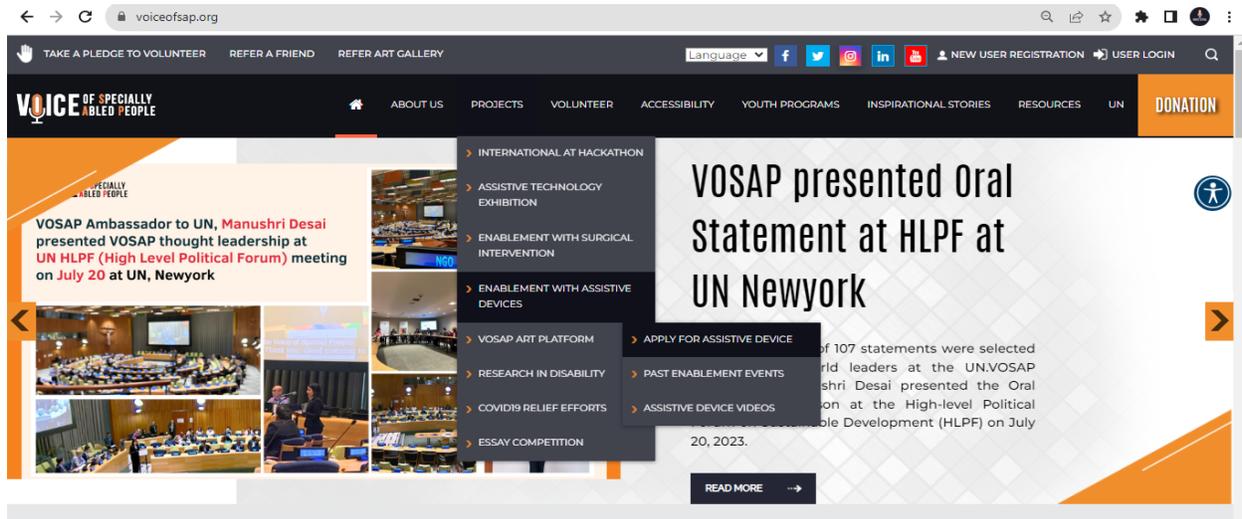


How to apply for Assistive Devices/Self Employment Kit

Step 1:-

1. Go to our website: <https://www.voiceofsap.org/>
2. Then go to the menu bar and click on projects dropdown menu & find Enablement with Assistive Devices tab and select apply for assistive devices.



3. Once the page is opened then click on the apply now button & enter your full name and email. Verify your Email by Clicking the link received in the email.

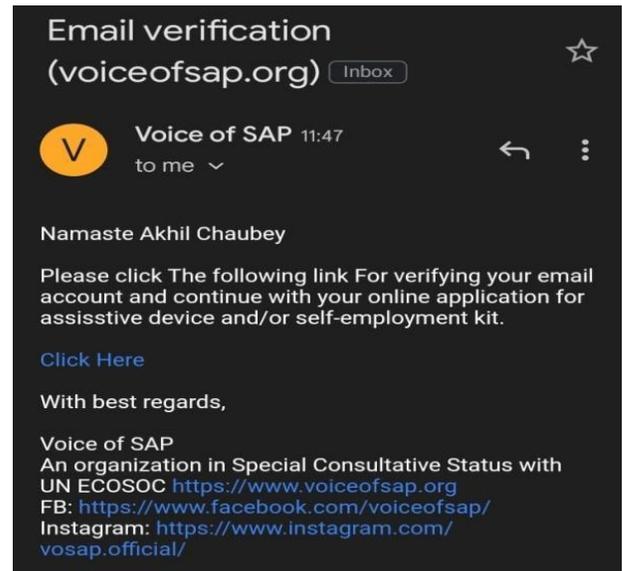
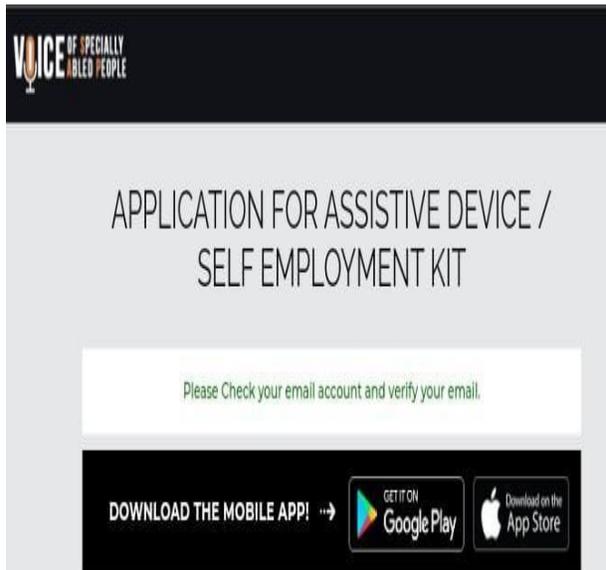
APPLICATION FOR ASSISTIVE DEVICE / SELF EMPLOYMENT KIT

Welcome to Voice of SAP to request for the grant of assistive devices and/or self employment kit to help you live a better life with dignity. Please enter your name and email here, we will send you an email to verify the email ID along with a link to come back here and finish your application.

Full Name (required)

E-mail (required)

SUBMIT



4. Enter Your Name, Phone, Country, State, City, Select Partner Organization which has referred you.

Partner Organization (required)

APH: Belgaum

- APH: Belgaum
- BPA: Ahmedabad
- SNEH : Nagda
- SYSS: Basti
- GASVS: Chhindwara
- Care Educational Trust: Lucknow
- Deva International: Varanasi
- Dextroware Devices: Chennai
- VYO: Rajkot
- Neomotion: Chennai
- VIPO : Vadodara
- Indent
- Bharat Vikas : Patna
- Trestle Labs

Country (required)

Select Country

City (required)

Select City

ne)

- Beauty Parlour Kit
- Tricycle
- Sewing machine

5. Then select the assistive device that you require.

Select Assistive Device/Service: (Information on Subsidy Here)

100 % Subsidized

- Sewing machine
- Handicare
- Beauty Parlour Kit
- Tricycle
- Saarthi Smartcane (Age 16- 35)
- Daisy Player
- Wheelchair
- Smart Phone

Heavily Subsidized

- Flexmo Premium Elbow Crutch
- Smart Glasses
- Signable- ISL Interpreter Service
- Kibo XS device for visually-impaired
- CiCare
- Flexmo Premium Underarm Crutch
- Kibo App
- Hearing Aid- We hear
- Flexmo silent walker
- Mouseware (Wearable head device)

Partially Subsidized

- Laptop
- Neofly (customized wheelchair)
- Combo (Neofly+Neobolt)

6. Mention whether you have received any assistive devices in the past or not.
7. Enter your Government Issued ID Number and answer all the queries(mandatory).
Select your income range, Delivery center and Primary use of the Device.

| | |
|---|---|
| <p>Govt ID Number(Aadhar number, Passport number etc)</p> <input style="width: 95%; height: 25px;" type="text" value="313424425435"/> | <p>Did you receive any Assistive Devices in past? (required)</p> <p><input type="radio"/> Yes <input checked="" type="radio"/> No</p> |
| <p>Primary Use of Assistive Device (required)</p> <input style="width: 95%; height: 25px;" type="text" value="Education"/> | <p>Explain the Usage Purpose in Detail (required)</p> <input style="width: 95%; height: 25px;" type="text" value="test"/> |
| <p>Tell us about you and your family? (required)</p> <input style="width: 95%; height: 25px;" type="text" value="test"/> | <p>Family income per year (required)</p> <input style="width: 95%; height: 25px;" type="text" value="Less Than Rs 1.5 LAC"/> |
| <p>Delivery Center (required)</p> <input style="width: 95%; height: 25px;" type="text" value="KASHIBHAI LALITABEN BHADRABEN & JAGDISHBHAI PATEL"/> | <p>Delivery Address</p> <input style="width: 95%; height: 25px;" type="text"/> |



8. Click on the checkbox and then hit the Next Step Radio button to proceed for step 2.

I confirm that information submitted is accurate.

NEXT STEP

Step 2:-

For Kibo App, Kibo XS Device and Signable App:-

1. Upload all the mandatory documents.
2. Attach the Government Issued Identity Card, UDID, Income Certificate and photograph.

APPLICATION FOR ASSISTIVE DEVICE / SELF EMPLOYMENT KIT

Step 2

Please attach Income Proof, Passport size photo and Reference letter of community leader on this page. Please fill in the complete Address including pincode.
Voice of SAP will review your application and contact you for further evaluation and processing of your application.

| | |
|---|---|
| E-mail <small>(required)</small> <input type="text" value="akhil@voiceofsap.org"/> | Attach Income Certificate <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Full Picture of the beneficiary <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Attach UDID <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Upload Government Issued ID <small>(Birth Certificate/Voter ID/ Aadhar)</small> <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | |
| Address <small>(required)</small> <input style="height: 40px;" type="text"/> | |

I confirm that information submitted is accurate.

3. Write down your full address.
4. Once all the documents and details have been uploaded, please click the checkbox to confirm the submission of information and click on Submit.

Note: Documents should be uploaded as image .JPEG/PNG, Word File or PDF format only.



For Tricycle, Daisy Player, Smatcane(Sarhi), Handicare, Sewing Machine, Wheelchair, Smartphone, Flexmo Elbow Crutches, Flexmo Underarm Crutches, Flexmo Silent Walker, CiCare, Smart Glasses and Laptop:-

1. Upload all the mandatory documents.
2. Attach the Government Issued Identity Card, UDID, Income Certificate, Reference Letter, Self Declaration and photograph.

APPLICATION FOR ASSISTIVE DEVICE / SELF EMPLOYMENT KIT

Step 2

Please attach Income Proof, Passport size photo and Reference letter of community leader on this page. Please fill in the complete Address including pincode.
Voice of SAP will review your application and contact you for further evaluation and processing of your application.

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| E-mail <small>(required)</small> <input type="text" value="akhil@voiceofsap.org"/> | Attach UDID <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Upload Government Issued ID <small>(Birth Certificate/Voter ID/ Adhaar)</small> <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Attach Income Certificate <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Attach Reference letter of community leader <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Self Declaration <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Full Picture of the beneficiary <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | |
| Address <small>(required)</small> <input style="width: 100%; height: 40px;" type="text"/> | |
| <input type="checkbox"/> I confirm that information submitted is accurate. | |
| <input type="button" value="SUBMIT"/> | |

3. Write down your full address.
4. Once all the documents and details have been uploaded, please click the checkbox to confirm the submission of information and click on Submit.

Note: Documents should be uploaded as image .JPEG/PNG, Word File or PDF format only.

For Hearing Aid:-

1. Upload all the mandatory documents.
2. Attach the Government Issued Identity Card, UDID, Income Certificate, Audiogram Report, Reference Letter, Self Declaration and photograph.

APPLICATION FOR ASSISTIVE DEVICE / SELF EMPLOYMENT KIT

Step 2

Please attach Income Proof, Passport size photo and Reference letter of community leader on this page. Please fill in the complete Address including pincode.
Voice of SAP will review your application and contact you for further evaluation and processing of your application.

| | |
|---|---|
| E-mail <small>(required)</small> <input type="text" value="akhil@voiceofsap.org"/> | Attach UDID <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Upload Government Issued ID <small>(Birth Certificate/Voter ID/ Aadhaar) (required)</small> <input type="button" value="Choose file"/> No file chosen | Attach Income Certificate <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Attach Reference letter of community leader <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Self Declaration <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Audiogram Report <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Full Picture of the beneficiary <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |

Address (required)

I confirm that information submitted is accurate.

3. Write down your full address.
4. Once all the documents and details have been uploaded, please click the checkbox to confirm the submission of information and click on Submit.

Note: Documents should be uploaded as image .JPEG/PNG, Word File or PDF format only.

For Beauty Parlour Kit:-

1. Upload all the mandatory documents.
2. Attach the Government Issued Identity Card, UDID, Income Certificate, Beautician Certificate, Reference Letter, Self Declaration and Photograph.

APPLICATION FOR ASSISTIVE DEVICE / SELF EMPLOYMENT KIT

Step 2

Please attach Income Proof, Passport size photo and Reference letter of community leader on this page. Please fill in the complete Address including pincode.
Voice of SAP will review your application and contact you for further evaluation and processing of your application.

| | |
|--|--|
| E-mail <small>(required)</small> | Attach UDID <small>(required)</small> |
| <input type="text" value="akhil@voiceofsap.org"/> | <input type="button" value="Choose file"/> No file chosen |
| Upload Government Issued ID <small>(Birth Certificate/Voter ID/ Adhaar)</small> <small>(required)</small> | Attach Income Certificate <small>(required)</small> |
| <input type="button" value="Choose file"/> No file chosen | <input type="button" value="Choose file"/> No file chosen |
| Attach Reference letter of community leader <small>(required)</small> | Self Declaration <small>(required)</small> |
| <input type="button" value="Choose file"/> No file chosen | <input type="button" value="Choose file"/> No file chosen |
| Beautician Certificate <small>(required)</small> /label> | Full Picture of the beneficiary <small>(required)</small> |
| <input type="button" value="Choose file"/> No file chosen | <input type="button" value="Choose file"/> No file chosen |
| Address <small>(required)</small> | |
| <input type="text"/> | |
| <input type="checkbox"/> I confirm that information submitted is accurate. | |
| <input type="button" value="SUBMIT"/> | |

3. Write down your full address.
4. Once all the documents and details have been uploaded, please click the checkbox to confirm the submission of information and click on Submit.

Note: Documents should be uploaded as image .JPEG/PNG, Word File or PDF format only.

For Neobolt(Customized Wheelchair) and Combo (Neobolt and Neofly).

1. Upload all the mandatory documents.
2. Attach the Government Issued Identity Card, UDID, Income Certificate, Beautician Certificate, Reference Letter, Self Declaration and Photograph.

APPLICATION FOR ASSISTIVE DEVICE / SELF EMPLOYMENT KIT

Step 2

Please attach Income Proof, Passport size photo and Reference letter of community leader on this page. Please fill in the complete Address including pincode.
Voice of SAP will review your application and contact you for further evaluation and processing of your application.

| | |
|---|---|
| E-mail <small>(required)</small> <input type="text" value="akhil@voiceofsap.org"/> | Attach UDID <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Upload Government Issued ID <small>(Birth Certificate/Voter ID/ Adhaar)</small> <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Attach Income Certificate <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Attach Reference letter of community leader <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Self Declaration <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |
| Bajaj Finance card loan approved letter <small>(required)</small> <input type="button" value="Choose file"/> No file chosen | Full Picture of the beneficiary <small>(required)</small> <input type="button" value="Choose file"/> No file chosen |

Address (required)

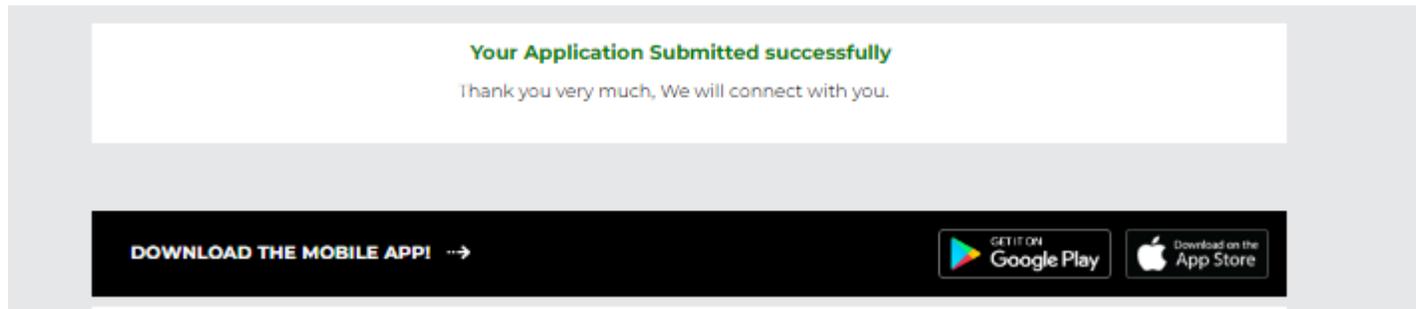
I confirm that information submitted is accurate.

3. Write down your full address.
4. Once all the documents and details have been uploaded, please click the checkbox to confirm the submission of information and click on Submit.

Note: Documents should be uploaded as image .JPEG/PNG, Word File or PDF format only.



After submission you will be directed to this screen.



After the submission of the form you will be receiving an Email.

Once the Verification and assessment of application is done, you will receive an email from the team regarding the update of your application.

! THANK YOU !