



Florida and Virgin Islands (FAVI)

Deaf-Blind Collaborative

PO Box 100234
Gainesville, FL 32610-0234
Phone: 800-667-4052 Fax: 352-273-8539

INSTRUCTIONS: Please complete this form and return it to the Florida deaf-blind project if

the \_\_\_\_\_ district currently

DOES NOT HAVE ANY STUDENTS WITH DEAF-BLINDNESS

AS OF

Deaf-Blindness Criteria:

Vision loss = a) 20/70 or less acuity in the better eye (with correction)

OR b) peripheral field loss

OR c) progressive vision loss (vision is expected to deteriorate)

OR d) need for enlargement, additional light, high-contrast, etc.

Hearing loss: a) loss of at least 30 decibels (unaided) in one or both ears

OR b) inability to screen out background noise

OR c) progressive hearing loss (hearing is expected to deteriorate)

As of \_\_\_/\_\_\_/20\_\_\_, we at \_\_\_\_\_ School District DO NOT have students to report who meet the state criteria as having deaf-blindness.

Name \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

