Checklist for Section 504 Eligibility Review

School	Name:	Date:
Student	Name:	
	A signed copy of Section 504 Student Review Request Form is for the school. This form will serve as Part 1 of the accommodation plan.	
	Building 504 coordinator or designee completes page 2 of the Section Accommodation Plan (Part 2: Pre-Meeting Details)	n 504
	Meeting time and location are set.	
	ALL Eligibility team members are NOTIFIED OF MEETING time, local any information they need to bring to the meeting. DATA may include grades, homework grades, MEAP scores, discipline reports, etc. This important!	e test
	Parents are provided a copy of Parent/Student Rights under Section Parent Notice: Section 504 Student Eligibility Meeting.	504 and
	Signed copy of Parent Notice: Section 504 Student Eligibility Meet secured by building 504 coordinator or designee (not required to produith an eligibility review meeting).	_
	Part 3a and 3b of Section 504 Accommodation Plan is to be compall eligibility meetings.	leted at
	Part 4 of the Section 504 Accommodation Plan is completed if the is found to be eligible for a Section 504 plan. The first page of Part 4 summary of the accommodation plan. A copy of this page is to be gindividuals responsible for implementing the plan.	is a
	The final page of the Section 504 Accommodation Plan is the "sign or and is to be completed at every eligibility meeting. Secure signatures parents and all team members.	
	Identify tentative date for next review of the plan. If initial, carefully refor the next few weeks and adjust if necessary. After successful plan been devised, 504 is done annually.	•
	The original Section 504 Accommodation Plan is filed in the student's cumulative file.	3
	If the plan is no longer needed by the student it must be officially term through review by an eligibility team. Completing and attaching the o Section 504 Termination Form to the front of the plan does this. Terminates are filed in the student's cumulative file.	ne page

Section 504 Student Review Request Form

Student Name:		Date:
Student #:		Birth Date:
Address:	City:	
Parent(s) Name	e(s)	
Home Phone:	Work Phone:	
	Phone:	
	Building 504 Coordinator/Designee, and Title	
on disability in a school to provide	the Rehabilitation Act of 1973 is designed to prohibit discrimination any program or activity receiving federal money. This statute oblined equal access and equal opportunity to otherwise qualified personant student to be eligible for a 504 plan, the student must meet all the student meet must meet all the student must meet all the student meet meet must meet all the student meet meet meet meet meet meet meet m	gates publi ons with
•	ohysical or mental impairment (has a history of having a physical mental impairment)	
2. Tha	at substantially limits	
3. On	ne or more major life activities	
from school prog	use this disability that the student is unable to gain equal access grams and services. The publication, A Parent Guide to Section act of 1973, is a resource available to parents through their school	504 Of the
	nat a student may be eligible for Section 504 support please comp ng form and submit it to your school's principal or building 504 co	
Please describe	e the student concern and how it matches the above criteria	ı .
_		
Signature of person req	questing Section 504 review:	

Part 2: Pre-Meeting Details:

(To be accomplished by building 504 coordinator or designee.)

1.		d on information gathered as part of this review requeduled?	uest will an eligibility me	eetina
		If "No" briefly explain:		
2.	The p	ourpose of this meeting is to conduct: ☐ Initial review ☐ Yea	rly review	Other
3.	Does conve	additional information need to be secured before the ned?	ne eliqibility meeting is Ves	
		If "Yes" identify information needed for the eligibili responsible for securing this information.	ty meeting, and who is	
4.	to pa	Office of Civil Rights (OCR) mandates that the follow irent(s) / guardian(s) before an eligibility meeting is a following was provided in the space below.	•	•
		Parent / student Section 504 rights		<u>Date</u>
		Parent Notice: Section 504 meeting		
5.	Eligibi	ility meeting details		
	E	Eligibility meeting date:	time:	
		Location:		
	Notes:	·		

Part 3A: 504 Eligibility Meeting

The 504 eligibility team is to include individuals who are knowledgeable about the student and the meaning of the data / information reviewed. The information reviewed by the eligibility team should be current and focus on the area of concern. All eligibility team members sign on page 7.

1.	Area(s	s) of concern:
2.		nary of formal performance data reviewed (e.g. MEAPS, Test Grades, Homeworkes, Progress Reports, Discipline Referrals, etc.
3.	Summ	nary of staff reports/comments:
4.	Summ	nary of parent(s) / guardian(s) report / comments:
5.	Other	pertinent information (Dr. diagnosis, etc.)

Part 3b: Eligibility Statement

Based on the eligibility team's findings answer the following questions.

1.	Does t		der	nt have a disability	y or handicap	that	substantially limits Pyes	one or more life
	Explair	n:						
2	If "Voc	" which	. 0	the following ma	ior life activiti	oc ic	being substantial	ly limited by the
۷.		ity or h		J	ijoi ille activiti	ES 15	being substantial	iy iiinited by the
				Learning			Seeing	
		ſ		Breathing			Sleeping	
		ſ		Working			Self-Care	
	-							
	-							
3.				ity impact the stus and services?	dent's ability t	o red	ceive equal access Ves	and benefit from
ac	tivity th	at is su	bs		this condition	n, the	d 3 and the team id student is eligible rt 4.	-
	•	•		n answered "No" o	•	_	bility meeting by doge 6.	ocumenting the

Part 4: 504 Accommodation Plan (Confidential)

St	Student Name: To	day's Date:
1.	. Specific accommodations and the staff who are responsible for implementing	g the plan.
2.	. Student responsibilities	
3.	. Parent / Guardian responsibilities	
4.	 Other accommodations and related services that will be provided to the stud individuals for arranging and / or providing them: 	ent and

5. Eligibi	lity team participants (and accomn	nodation plan participants if student	is eligible).		
	<u>Name</u>	<u>Title</u>			
6. Date f	or 504 accommodation plan reviev	w:			
	ding 504 coordinator or designe ing staff needed to conduct this	e will be responsible for scheduli review.	ng and		
7. Paren	t / Guardian statements:				
	☐ I received a written notice of my rights under Section 504				
	☐ I received notice of the Section 504 evaluation and accommodation plan meeting				
	☐ I agree with the Section 504 plan as written				
	I understand that, if I disagree wit	h the content of this plan. I have the	e right to ask		
a Section 504 review meeting by filing a written request with the school principal,					
building 504 coordinator or designee.					
	Parent / Guardian Si	gnature			
	 Parent / Guardian Si	gnature			

File this original 504 Accommodation Plan (all 7 pages) in the student's cumulative file. If the plan is no longer needed by the student it <u>must</u> be officially terminated by a 504-evaluation committee. Have the committee convene, complete a Section 504 Termination Form and attach the completed form to the <u>front</u> of this Section 504 Accommodation Plan.

State:	

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