\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SCHOOL DISTRICT

SECTION 504/ADA POLICY

GUIDELINES AND FORMS

SECTION 504 GUIDELINES

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**SECTION I**

**504 Board Policy**

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**Section 504**

**Administrative Guidelines**

Introduction

The Board of the School District assures students, parents, applicants for employment, employees and citizens that it will not discriminate against any individual on the basis of disabilities. These guidelines comply with the Board’s directive to establish a grievance procedure as a means of reaching, at the lowest possible administrative level, a fair and equitable settlement of differences and issues relating to alleged discrimination under Section 504 and the Americans with Disabilities Act (ADA). As directed by the Board, the Superintendent has established procedural safeguards for the identification, evaluation, and educational programming of students with disabilities.

Parents, students, employees and the public have the right to file an internal grievance complaint regarding an alleged violation, misinterpretation or misapplication of Section 504, ADA and their implementing regulations or Board Policy and these Administrative Guidelines. In addition, students and their parents and the District have the right to request a due process hearing before an impartial hearing officer (IHO) regarding the identification, evaluation or educational placement of persons with disabilities, and the right to examine educational records.

Section 504 of the Rehabilitation Act of 1973 (“Section 504") prohibits discrimination against persons with a disability in any program receiving Federal financial assistance. The Americans with Disabilities Act (ADA) prohibits discrimination on the basis of disability in public accommodations and employment. A person with a disability is an otherwise qualified person who:

1. **Has** a physical or mental impairment, which substantially limits one or more major life activities;

2. **Has a record of** a physical or mental impairment which substantially limits one or more major life activities; or

3. **Is regarded as having** a physical or mental impairment, which substantially limits one or more major life activities. Individuals who are “regarded as” having a mental or physical impairment include individuals who have an “actual or perceived mental or physical impairment whether or not the impairment limits or is perceived to limit a major life activity.”

**Major life activities** include functions such as caring for one’s self, performing manual tasks, seeing, hearing, walking, standing, communicating, speaking, eating, bending, lifting, working, concentrating, learning, reading, thinking, sleeping and breathing.

**Physical or mental impairment** means (a) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body function: neurological; musculoskeletal; respiratory, including speech organs; circulatory; reproductive; digestive; and endocrine; bladder; bowel; normal cell growth; and immune system or (b) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

The following physical and/or mental impairments do not qualify an individual as disabled: substance abuse disorders resulting from illegal use of drugs; kleptomania; pyromania; exhibitionism; voyeurism; gender identity disorders not resulting from physical impairment; other sexual disorders/differences.

In order to fulfill its obligation under Section 504 and ADA, the School District recognizes its responsibility to avoid discrimination in policies and practices regarding its personnel and students. No discrimination against any person with a disability will be permitted knowingly in any of the programs and practices in this District.

A Board of Education has specific responsibilities under Section 504, which include the responsibility to identify, evaluate, and, if the child is determined to be eligible under Section 504, to afford access to appropriate educational services. In other words, the Board will not discriminate against otherwise qualified students with disabilities (i.e. students who otherwise meet eligibility criteria – e.g., age – for participation in the educational program and/or activities) in the provision of its educational programs and activities. The Board will make reasonable modifications to its programs and activities to accommodate otherwise qualified students with disabilities, unless such modifications/accommodations would impose an undue burden on the operation of the particular program, or would alter the fundamental nature or purpose of the program. In addition to its provision of educational services, the Board will not discriminate against otherwise qualified students with disabilities in its provision of non-educational programs, services and activities such as counseling, athletics, transportation, health services, recreational activities, special interest groups or clubs, referrals to other agencies, and employment.

If a student’s parents disagree with a determination made by the professional staff of the District, they may file a grievance or request a hearing before an impartial hearing officer. The Superintendent shall develop administrative guidelines ensuring that the procedural safeguards available to persons alleging discrimination under Section 504 and ADA are provided and appropriate complaint procedures are in place.

District Compliance Officer

The District’s Compliance Officer is the . He/she can be reached at \_\_\_\_.

 **School District**

**Section 504 Administrative Guidelines for**

**Identification, Evaluation & Placement of Students with Disabilities**

**I. Procedures for New Section 504 Inquiries – Students**

**The District’s Compliance Officer shall designate an individual in each school building to serve as the “Building 504 Officer.”**

1. REFERRAL – Referrals may be made by parents, teachers, or other knowledgeable professionals by a written referral made through the Building 504 Officer. Referrals may be made at any time during the school year. Prior to completing the written referral, school staff is encouraged to contact appropriate Related Services specialist(s) to seek input and/or guidance regarding the need for referral.

B. ASSESSMENT – The Building Level team will collect all relevant information on the student (i.e. medical reports, doctor reports, medication, grade cards/report cards, school history, disciplinary action, etc.) to assist in documenting the child:

1. Has, has had a record of or is regarded as having a mental or physical impairment; and

2. The mental or physical impairment substantially limits one or more major life activities.

The Building 504 Officer should contact school staff that perform assessments and have them review existing pertinent information and determine whether additional assessments are needed. If individual evaluation is needed, written parental consent shall be obtained and a copy of student and parental rights sent. Evaluations are then performed and the disability documented in writing. This evaluation should include consideration of any behaviors or academic factors that interfere with the otherwise qualified student’s regular participation in the educational program and/or activities.

Reevaluations are not required at specific intervals; however, assessments will be updated as needed to insure that eligibility and accommodation planning is based on information that accurately defines the student’s disability and reflects the student’s current strengths and needs. At least every three (3) years appropriate school staff should determine whether updated evaluations are needed. When a reevaluation is needed, parents will be sent prior notice and a copy of parental rights.

C. ELIGIBILITY DETERMINATION - Following completion of the assessment/evaluation, the Building 504 Officer will schedule an Intervention Assistance Team (IAT) meeting to review the information, determine eligibility, and determine how to proceed.

D. COMPLETION OF SECTION 504 REVIEW FORM - Individuals involved in the IAT meeting **may** include the following: Parents; Principal; Guidance Counselor; Teachers; School Psychologist and/or Director of Special Education.

Information to be considered by the team: individual or group achievement tests; student work samples; observations; behavior checklists; teacher rating scales; teacher information; school records; medical information; parent information; etc.

Factors which should be considered by the IAT in determining whether a student’s physical or mental impairment substantially limits his/her learning are as follow: (generally, multiple factors will be necessary to demonstrate substantial limitation)

1. Has the student demonstrated a consistent need for substantially more time to complete homework assignments than required by students without disabilities?

2. Has the student demonstrated a consistent need for substantially more time to complete in-school assignments than required by students without disabilities?

3. Is modified testing consistently necessary for the student to be able to demonstrate knowledge?

4. Does the student exhibit frequent behaviors, such as drowsiness, impulsivity, inattentiveness, or aggressiveness, associated with an identified physical or mental impairment or medication taken to address the condition and do these behaviors significantly interfere with school performance?

5. Does the student exhibit significant difficulty with planning, organization and execution of school-related activities and assignments?

6. Is the student chronically absent or tardy for reasons related to a diagnosed physical or mental impairment and are such absences or tardies interfering with his/her school performance?

7. Has the student experienced a steady decline in academic performance for, which there is no known cause other than the diagnosed physical or mental impairment?

8. Has the student experienced a steady increase in disciplinary interventions for, which there is no known cause other than the diagnosed condition?

9. After at least two intervention strategies have been implemented in regular education, does the student still exhibit significant learning difficulties?

Possible outcomes of the meeting:

1. Student determined to be eligible for modifications/accommodations pursuant to a Section 504 Plan or no Section 504 is required although the student was determined to be eligible.

2. Student determined to be ineligible for a Section 504 Plan but does need some interventions that can be developed by the building Intervention Assistance Team (IAT).

3. The team determines that it needs to collect more information before making an eligibility determination (Parents; Doctors; Observations; MFE; etc.); or

4. Student determined ineligible for a Section 504 Plan and has no need for special school/classroom interventions. Student will be served appropriately in the regular education program without specific interventions. The record of the District’s proceedings should reflect the identification of the student as not disabled under Section 504, and state the basis for the decision that no special accommodations are presently needed.

E. If a Section 504 Plan is determined to be appropriate, the team will develop and complete the Section 504 Plan Form. Aside from the description of the student’s disability and the accommodations needed, the Plan should also specify how the accommodations will be provided, and by whom. The Section 504 Plan should include parent/team signatures and needs to have a copy sent to the District’s Compliance Officer **as soon as possible**. Copy of the Plan should also be placed in the student’s cumulative folder. If the parents are not present at the meeting, the parents’ signatures are required prior to implementation of the initial 504 Plan. Parent signature is not required for subsequent 504 plans. A copy of the Plan must be sent to the student’s parents.

F. Upon completion of the Section 504 Plan, the Building 504 Officer needs to follow Procedures for Existing Section 504 Plans – Students (see Section II, below).

G. If the parents challenge the actions of the District regarding identification, evaluation or placement of their child, they have the right to request a due process hearing before an impartial hearing officer to resolve the dispute (See *Student and Parent Procedural Rights*, Section 504-5).

**II. PROCEDURES FOR EXISTING SECTION 504 PLANS – STUDENTS**

A. Beginning of each school year (August - September):

1. Building 504 Officer checks with the District’s Compliance Officer for a list of students in his/her building who have had Section 504 Plans in the past.
2. The Building 504 Officer is responsible for then obtaining a copy of previous school year’s Section 504 Plan.
3. The Building 504 Officer should then notify the student’s parents that the Section 504 Team needs to meet to review the Section 504 Plan and to determine whether it is still necessary/appropriate for the new school year.
4. The Building 504 Officer will set up a meeting to formulate a Section 504 Plan for the student for the new school year. The Section 504 Review Form should be completed. Individuals involved in the meeting may include the following: Parents; Principal; Guidance; Teachers; School Psychologist; School Nurse and/or Director of Special Education.

NOTE: Under the Recommendations Section of the Section 504 Review Form, they should decide whether to: (1) continue this plan; (2) discontinue; or (3) write a new plan.

1. If there is an “active” Section 504 Plan, a copy of the Plan needs to be forwarded to the District’s Compliance Officer by October 15 of each school year and a copy of the Plan placed in the student’s cumulative record folder.

B. During the school year:

The Section 504 Plan can be reviewed by the team at any time if concerns develop as to the appropriateness of the modifications/accommodations being used with the student. This review can be initiated by staff or parents.

C. Procedural Safeguards:

Any time the written results of a meeting are provided to a student’s parents, a form delineating the procedural safeguards/due process rights of the parents/child should also be provided to them.

D. If the parents challenge the actions of the District regarding identification, evaluation or placement of their child, they have the right to request a due process hearing before an impartial hearing officer to resolve the dispute (see Section 504-5, *Student and Parent Procedural Rights*, Grievance and Due Process Procedures).

**SECTION III**

**504 Forms**

504-1

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Copies: Section 504 Compliance Officer

Student File

Parent

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Schools**

**Parent/Guardian/Student Consent For Records Release**

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_ Birth Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street address)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(City, State, Zip Code)

From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name) (Street Address)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Agency) (City, State, Zip Code)

We are requesting the following information/records for the above-named student:

🞏 All personally identifiable data on file.

🞏 The following records only: (please specify)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for request: (please check)

🞏 To aid in making present and future educational decisions.

🞏 Other: (please specify)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

With the understanding that the district cannot assume responsibility for the confidentiality of educational information disclosed, I authorize you to release educational information regarding the student names above in the manner indicated.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Date) (Signature of parent/guardian)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Address)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(City, State, Zip Code

**FOR OFFICE USE ONLY**

Date Data Released\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name/Position)

Date Copies Mailed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name/Position)

Section 504-2

Page 1 of 2

**Authorization To Release Educational Records**

**Section I: Student Information**

This form provides authorization to release educational records and information relating to:

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section II: Disclosure and Use of Educational Records**

I hereby give my permission to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School District to disclose educational records for the above-referenced student and information in the manner described below.

**Section III: Description of Educational Records and Information to be Disclosed**

Describe/List the educational records or information you are authorizing to be disclosed (*i.e.,* all educational information, etc.):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section IV: Description of Persons or Entity Authorized to Receive and Use Released Information**

The District has my permission to release the information described above to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section V**: **Purpose of this Authorization**

The purpose of this communication is:

🞏 To aid in making present and future educational decisions.

🞏 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Section 504-2

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**Section VI: Expiration and Revocation**

This authorization may be revoked (canceled) at any time except to the extent that the District has already released personal health information prior to the revocation of this authorization. Requests for revocation must be in writing. To revoke the authorization, contact \_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. If not revoked, this authorization will expire one year after the date on which the authorization is signed.

**Section VII: Signature and Acknowledgement**

I acknowledge that this authorization is voluntary and that I have received a written copy of this authorization.

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

If a personal representative (for example, parent, legal guardian, etc.) signs this form on behalf of the individual identified in Section I, please complete the following:

**Representative’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

cc: Student File

Signator

Section 504-3

Page 1 of 2

**Authorization To Communicate With Outside Agencies/Individuals**

**Section I: Student Information**

This form provides authorization to communicate with other individuals/agencies relating to:

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section II: Disclosure of Personally Identifiable Information**

I hereby give my permission to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School District to communicate and share personally identifiable information with the individuals/agencies described below.

**Section III: Description of Personally Identifiable Information to be Disclosed**

Describe/List the personally identifiable information you are authorizing to be disclosed (*i.e.,* all educational information, etc.):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section IV: Description of Persons or Entity Authorized to Receive Information**

The District has my permission to communicate with and release the information described above to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section V**: **Purpose of this Authorization**

The purpose of this communication is:

🞏 To aid in making present and future educational decisions.

🞏 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Section 504-3

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**Section VI: Expiration and Revocation**

This authorization may be revoked (canceled) at any time except to the extent that the District has already released personally identifiable information prior to the revocation of this authorization. Requests for revocation must be in writing. To revoke the authorization, contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. If not revoked, this authorization will expire one year after the date on which the authorization is signed.

**Section VII: Signature and Acknowledgement**

I acknowledge that this authorization is voluntary and that I have received a written copy of this authorization.

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

If a personal representative (for example, parent, legal guardian, etc.) signs this form on behalf of the individual identified in Section I, please complete the following:

**Representative’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

cc: Student File

Signator

Section 504-4

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School District**

**Section 504 Notice Letter to Parent(s)/Guardian(s)**

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School District does not discriminate in its educational programs and activities on the basis of student’s disability. We will be convening a team of individuals to determine whether your child qualifies as a student with a disability under Section 504. The definition of an individual with a disability under Section 504 is:

An individual may have a disability under Section 504 if he/she:

1. Has a physical or mental impairment that substantially limits one or more major life activities. (For educational purposes, the term does not cover students primarily disadvantaged by cultural, environmental, or economic factors)

Major Life Activities under Section 504 includes, but is not limited to:

Caring for oneself Performing manual tasks Communicate with Others

Walking Seeing Bending

Hearing Speaking Standing

Breathing Learning Eating

Working Lifting Concentrating

Reading Thinking Sleeping

1. Has a record or history of each an impairment
2. Is regarded as having such an impairment

If your child is eligible, the 504 Team will determine what accommodations and services are needed to ensure that your child will have access to an education comparable to that available to students without disabilities.

*Parents and students have specific rights under Section 504. These rights are summarized on the Section 504 Parent/Guardian/Child Rights and Procedural Safeguards (****Section 504-5****).*

The evaluation process will look at all areas of suspected disability and may include standardized individual assessments, observations, input from teachers, and relevant medical information. Please provide your consent for us to accomplish this evaluation by indicating your decision and providing your signature (below) and returning the bottom half of this form to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Section 504 Compliance Officer/Designee Building Phone number

**-------------------------------------------------------------------------------------------------------------------------------------**

**PARENT / GUARDIAN CONSENT**

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_ I have received a written copy of the Section 504 Parent/Child Rights and Procedural Safeguards.

\_\_\_ Yes, I consent to having my child evaluated to determine whether he/she qualifies as a student with a disability under Section 504 and, If so, to determine whether accommodations are needed in the school setting.

\_\_\_ No, I do not consent to having my child evaluated.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature

Section 504-5

Page 1 of 5

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Schools**

**Section 504 Student and Parent Procedural Rights**

*Hearing*

The following procedural safeguards are available to students and parents who dispute any Board or administrative actions regarding the identification, evaluation, or educational placement of their child who, because of a disability, needs, or is believed to need, special instruction or related services:

1. Students have the right to take part in, and receive benefits from, public education programs without discrimination because of the child’s disability;

2. Parents have the right to be advised of their rights under federal and state law.

3. A parent has the right to receive written notice prior to any decision regarding the identification, evaluation, or educational placement of his/her child;

4. A parent has the right to have his/her child receive a free appropriate public education. This includes the right to be educated with students who are not disabled to the maximum extent appropriate (i.e. the student’s education will be provided in the regular education classroom unless it is demonstrated that education in the regular environment with the use of supplementary aids and services cannot be achieved satisfactorily). It also includes the right to have the District make reasonable accommodations to allow the child an equal opportunity to participate in school and in school-related activities. Your child has the right to a free and appropriate public education (FAPE), except for those fees that are imposed on non-disabled students or their parents/guardians. Insurers and similar third parties are not relieved from their obligation to provide services to a disabled.

5. A parent has the right to have the child educated in facilities and receive services comparable to those provided to students without disabilities;

6. A parent has the right to have the child receive accommodations if the child is found to be eligible under the Section 504 of the Rehabilitation Act of 1973 (“Section 504");

7. A parent has the right to have evaluation and educational placement decisions made based upon a variety of informational sources, and by persons who know the student, the evaluation data, and placement options. If qualified as disabled under Section 504, your child has a right to periodic reevaluations, generally every three (3) years.

8. A parent has the right to have the child transported in a non-discriminatory manner. However, if the District has made available a free appropriate education to the student which conforms to the requirements of Section 504 and nevertheless the parents choose

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to place the student elsewhere, the District is not obligated to pay for any costs incurred in transporting the student to that alternative school/program;

9. A parent has the right to have the child given an equal opportunity to participate in nonacademic and extracurricular activities offered by the District;

10. A parent has the right to examine all relevant records, including, but not limited to, those documents related to decisions regarding the child’s identification, evaluation, educational program and placement;

11. A parent has the right to obtain copies of educational records at a reasonable cost unless the fee would effectively deny the parents access to the records;

12. A parent has the right to a response from the School District to reasonable requests for explanations and interpretations of their child’s records;

13. A parent has the right to receive all information in the parent’s native language and mode of communication;

14. A parent has the right to request periodic re-evaluations and/or an evaluation before any significant change in program/service modifications;

15. A parent has the right to request amendments of the child’s educational records if there is reasonable cause to believe that they are inaccurate, misleading or otherwise in violation of the privacy rights of the child. If the School District refuses this request for amendment, it shall notify the parent within a reasonable amount of time, and advise the parent of the right to a hearing;

16. A parent has the right to request mediation or an impartial due process hearing related to decisions or actions concerning their child’s identification, evaluation, educational program or placement;

17. A parent has the right to file an internal grievance;

18. A parent has the right to be represented at any point in the process by an attorney; and

19. Parents may have the right to reasonable attorney fees as authorized by law (i.e. if the parents are successful on their due process claim).

20. Parents have the right to be notified of their Section 504 rights when evaluations are conducted, when eligibility is determined, when an accommodation plan is developed; and before there is a significant change in the plan for services.

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*Grievance Procedure – Students*

A “grievance” is a complaint by a student or parent. This grievance procedure may be used for any disagreement with respect to actions regarding the identification, evaluation, educational services or educational program of students who are believed to be disabled within the definition of Section 504/ADA. A student or parent may initiate the procedure when they believe that a violation, misapplication or misinterpretation of Board policy, or state or federal law or regulation has occurred.

Step 1: Principal Conference: A student or parent may initiate a grievance by making a written request for a conference with the building principal to discuss the complaint and seek resolution. The request shall fully describe the grievance, and be filed as soon as possible, but not longer than thirty (30) days after disclosure of the facts giving rise to the grievance. The principal shall conduct the conference within five (5) school days following receipt of the request. The principal will state in writing his/her decision to the individual within five (5) school days following the conference.

Step 2: Appeal to the District’s Compliance Officer: If the grievance is not resolved satisfactorily at Step 1, the student or parent may appeal the principal’s decision in writing to the District’s Compliance Officer. The appeal must be made within five (5) school days following receipt of the principal’s decision. The District’s Compliance Officer will review the case, may conduct an informal hearing, and will notify all parties in writing of his/her decision within ten (10) school days of receiving the appeal.

Step 3: Further Appeal: If the grievance is not resolved satisfactorily at Step 2, the student or parent may appeal for an independent due process hearing (see below) or may take the matter directly to the U.S. Department of Education’s Office for Civil Rights. A parent or student may bypass the grievance procedure and take the matter directly to the United States Department of Education’s Office for Civil Rights or submit a request for a due process hearing. The request for due process should be made in writing to the District’s Compliance Officer. Nothing in this procedure prohibits the student or parent from submitting the complaint directly to the U.S. Department of Education’s Office for Civil Rights.

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*Due Process Hearing – Students*

1. When a request for a due process hearing is received, the aggrieved party will have the opportunity to receive a hearing conducted by an impartial hearing officer (“IHO”) (i.e. by a person not employed by the board of education, not involved in the education or care of the child, and not having a personal or professional interest which would conflict with his/her objectivity in the hearing).
2. The School District will maintain a list of trained IHOs, which may include IDEA hearing officers, attorneys, and Directors of Special Education outside the District. The District’s Compliance Officer will appoint an IHO from that list, and the costs of the hearing shall be borne by the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School District. The appointment of an IHO will be made within fifteen (15) school days after the request for a due process hearing is received.
3. A party to such a due process hearing shall have:

a. The right to be accompanied and advised by counsel and by individuals with special knowledge or training with respect to the problems of children with disabilities;

b. The right to present evidence and confront, cross-examine and compel the attendance of witnesses;

c. The right to a written or electronic verbatim record of such hearing; and

d. The right to written findings of fact and decisions.

1. The IHO shall conduct the due process hearing within a reasonable period of time (i.e. not to exceed ninety [90] days of the request for such a hearing, unless this time-frame is mutually waived by the parties or is determined by the IHO to be impossible to comply with due to extenuating circumstances).
2. The IHO will give the parent and/or student written notice of the date, time and place of the hearing. Notice will be given no less than twenty-one (21) days prior to the date of the hearing, unless otherwise agreed to by the parent and/or student. The notice shall include:

a. A statement of time, place and nature of the hearing;

b. A statement of the legal authority and jurisdiction under which the hearing is being held;

c. A reference to the particular section of the statutes and rules involved;

d. A statement of the availability of relevant records for examination;

e. A short and plain statement of the matters asserted; and

f. A statement of the right to be represented by counsel.

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1. The IHO shall conduct the hearing in a manner that will afford all parties a full and fair opportunity to present evidence and to otherwise be heard. The parent and/or student may be represented by another person of his/her choice, including an attorney.
2. The IHO shall make a full and complete record of the proceedings.
3. The IHO shall render a decision in writing to the parties within thirty (30) days following the conclusion of the hearing. The decision will include findings of fact and will address whether or not the administration has met all procedural aspects of the student’s educational plan, including that:

a. The procedures utilized in determining the student’s needs have been appropriate in nature and degree;

b. The student’s rights have been fully observed; and

c. The provision of aids, services or programs (i.e. accommodations) to the student affords a free appropriate public education.

The notification shall include a statement that either party may appeal the decision.

1. Appeal of the IHO’s decision may be made to a federal court of competent jurisdiction.

**DUE PROCESS HEARING – DISTRICT**

The District may initiate a due process hearing by providing the student and his/her parents with notice that the District has initiated the hearing. All hearing procedures/rights shall be the same as described under **Due Process Hearings – Students**. The District shall not be required to file due process under any circumstances.

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Schools**

**Section 504 Eligibility Determination**

Initial \_\_\_\_ Re-evaluation \_\_\_\_

Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ID# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referred By \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Meeting Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for Referral:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Background Information:

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Medical/Educational Data:

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**Eligibility: Questions**

1. The child has, had, or is regarded as having a mental or physical impairment? 🞏Yes 🞏No

 If yes, specify the mental or physical impairment\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Does the impairment substantially limit one or more major life activities? 🞏Yes 🞏No

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3. Reasonable and special accommodations are necessary in order for the student to have equal access and participation to an education just as a non-disabled student? 🞏Yes 🞏No

4. Section 504 eligible? 🞏Yes, Plan Required 🞏Yes, Plan Not Required or 🞏No

If No, your child may be referred to the School’s Intervention Assistance Team (IAT) for general education intervention.

5.What major life activity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Performing manual tasks, seeing, hearing, caring for oneself, walking, standing, communicating, speaking, eating, bending, lifting, working, concentrating, learning, reading, thinking, sleep or breathing)

Attachments:

🞏Medical Data 🞏Educational Data 🞏Section 504 Plan 🞏I.A.T. Team Plan

Team Signatures:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Signature** | **Position** | **Agree** | **Disagree** | **Date** |
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NOTICE

You are hereby advised that you have procedural due process rights protected by Section 504 of the Rehabilitation Act of 1973. Please review the Section 504 Parent/Guardian/Child Rights and Procedural Safeguards provided to you by the school district. This school district has dedicated itself to providing equal admission opportunities, equal educational opportunities, and equal employment opportunities to all people regardless of handicap. To this end, the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Board of Education has adopted regulations, which establish procedures for the orderly settlement of complaints of students and employees of the district regarding alleged discrimination on the basis of handicap. A copy of the complete regulations may be obtained by contacting the Board of Education Administrative Offices. If the complaint is not satisfactorily resolved through the established district procedures, the student or employee may appeal in writing directly to the U.S. Department of Education, Region V, Office of Civil Rights, Plaza Nine Building/Room 222, 55 Erieview Plaza, Cleveland, Ohio 44114.

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Schools**

**Section 504 Plan**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Building \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher (s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

504 Plan: Initial 🞏 Periodic Review 🞏

Effective Dates: From\_\_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_\_\_ Meeting Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

504 Eligibility Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Eligibility under Section 504:** An individual with a disability(s) is a person with a mental or physical impairment that substantially impairs or restricts one or more major life activities, such as performing manual tasks, seeing, hearing, caring for oneself, walking, standing, communicating, speaking, eating, bending, lifting, working, concentrating, learning, reading, thinking, sleeping and breathing. Reasonable, special accommodations and/or modifications are necessary for the individual to access and participate in her/his education.

Area of Disability(s) and an Explanation of how the disability substantially limits a major life activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Schools**

**Section 504 Plan**

|  |  |
| --- | --- |
| Required school/classroom modifications and/or accommodations **necessary** for the student to have an opportunity commensurate with non-disabled peers | Individual(s) responsible for providing the accommodations and or modifications |
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Date of Review \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Participants (Name & Title): Date

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**Assessment of Students with Disabilities Under Section 504**

The reauthorized federal Individuals with Disabilities Education Improvement Act of 2004 reflects the intent to extend educational accountability and reform to all students, including those with disabilities. This legislation, along with the federal NCLB and Ohio law (SB 1, HB 3), mandates that all students with disabilities be included in general state and district-wide assessment programs and that they take either the general assessments (with or without accommodations) or alternate assessments. These laws provide clear expectations that states will align assessment of student achievement with academic content standards.

Ohio has these three ways to assess student achievement of academic content standards:

• Participation in the general assessments without accommodations *(most students)*;

• Participation in the general assessments with allowable accommodations *(many students with disabilities)*; and

• Participation in the alternate assessments *(small number of students with the most severe cognitive disabilities).*

Participation decisions, i.e.., taking tests with accommodations, must be made by the Section 504 team on an annual basis and documented in writing in the student’s Section 504 Plan **before** the student takes the tests.

Section 504 of the Rehabilitation Act of 1973 states that “no otherwise qualified handicapped individual…shall solely by reason of his/her handicap, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity receiving federal financial assistance.” Students with a 504 Plan may have accommodations during the administration of the statewide tests. The accommodation must be documented in writing on the student’s Section 504 Plan and must meet all four of the criteria listed in OAC 3301-13-03.

Such students may not be excused from the consequences of not passing tests required for graduation unless they are completing a curriculum that is *significantly different* from the curriculum completed by other students required to take the tests. *Such exclusions are rarely appropriate under a 504 Plan*.

A student no longer having a 504 Plan shall take any statewide assessment in the same manner as other students not having a 504 Plan. This would mean that the student may no longer be excused from the consequences of not passing the graduation tests. The student may no longer receive accommodations

Accommodations in test format and/or test administration procedures can be made to facilitate the needs of an individual student, if such accommodations are specified in writing in the 504 Plan **before** the student takes a test and if consistent with the criteria established in OAC 3301-13-03. Any accommodation that gives a student with disabilities an unreasonable advantage is not allowable, because it does not allow for valid assumptions to be made from the results.

OAC 3301-13- 03(H) specifies these **four criteria for *allowable* accommodations**:

• **The accommodation must be specified in a student with disabilities’ IEP and be provided to the student in the classroom for classroom- and district-wide tests.** In addition, the accommodation must be documented in writing on the testing page of the IEP or 504 Plan **before** the student takes a test.

• **The accommodation cannot change the content or structure of the test.** For example, the test administrator may not convert open-ended questions to multiple-choice questions.

• **The accommodation cannot change what type of knowledge or skill that a test is intended to measure.** For example, the test administrator is not permitted to read the passages from a reading test, because this would change the test from a measure of reading skills to a measure of listening skills. The use of assistive technologies (e.g., an acceptable calculator on a mathematics test or an acceptable word processor on a writing test) may be allowed if it does not change what a test is intended to measure. Such allowable accommodations may be appropriate to support student participation in a statewide test.

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**Section 504**

**Statewide And District Wide Testing Accommodations**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_

District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_

Section 504 Plan Effective Dates: From\_\_\_\_\_\_\_\_\_\_\_\_\_ To\_\_\_\_\_\_\_\_\_\_\_\_\_

For each subject tested in the child's grade, choose the method of assessment below. If "With Accommodations" is chosen for any subject, provide a description of the Accommodations for each subject in the right column.

Will the child participate in classroom, district wide or statewide assessments with accommodations required by his or her Section 504 Plan? 🞏Yes 🞏No

|  |  |  |  |
| --- | --- | --- | --- |
| **Area** | **Grade** | **The Child Will be Tested:** | **Details of Accommodations** |
| Reading |  | 🞏 With Accommodations🞏 Without Accommodations |  |
| Writing |  | 🞏 With Accommodations🞏 Without Accommodations |  |
| Math |  | 🞏 With Accommodations🞏 Without Accommodations |  |
| Science |  | 🞏 With Accommodations🞏 Without Accommodations |  |
| Social Studies |  | 🞏 With Accommodations🞏 Without Accommodations |  |
| Other |  | 🞏 With Accommodations🞏 Without Accommodations |  |

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Copies: Student File

Principal

Parents

**Section 504**

**Manifestation Determination Worksheet**

Student Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_

District \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_

|  |
| --- |
|  **I. I. Nature of the Behavior Subject to Disciplinary Action**  |
|  |
| Describe the student’s behavior that violated rule or code of conduct (in observable, measurable terms):  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| **I. II. Nature of Disability** |
|  |
| Describe the nature and severity of the student’s disability (in observable, measurable terms):  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

Section 504-9

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|  |
| --- |
| **I. III. Describe how the disability affects the student’s:** |
|  |
| 1. Academic Progress:
 |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| 1. Social Skills Development:
 |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| 1. Self-care, Domestic, and/or Community Skills:
 |
|  |
|  |
|  |
|  |
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|  |
| 1. Receptive and Expressive Language:
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Section 504-9

Page 3 of 4

|  |
| --- |
| **I. IV. Relevant Information:** |
|  |
| 1. Evaluation/Diagnostic Results
 |
| Date of last evaluation report:\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Evaluation current (less than 1year)? \_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
|  |
| Do the existing evaluation/diagnostic results address current areas of concern? |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| 1. Relevant Parent Information:
 |
|  |
|  |
|  |
| Sources of information |
|  |
|  |
|  |
|  |
| 1. Observations of the Student:
 |
|  |
|  |
|  |
| Sources of information |
|  |
|  |
|  |
|  |
| 1. Section 504 Plan:
 |
| Date of last plan:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Is the plan current?\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
|  |
| 1. Placement:
 |
| Describe the current placement designed to meet the student’s needs: |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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|  |
| --- |
| **I. V. Determination of the Relationship of the Behavior of Concern to the Student’s Disability:** |
|  |
| 1. In relation to the behavior subject to disciplinary action:
 |
| * 1. Is the student’s 504 Plan appropriate?\_\_\_\_\_\_\_\_
 |
| * 1. Were accommodations/modifications, supplemental aids and services provided, consistent with the student’s 504 Plan and placement?\_\_\_\_\_\_\_
 |
| * 1. Were behavior intervention strategies provided, consistent with the student’s 504 Plan and placement?\_\_\_\_\_\_\_\_\_
 |
| 1. As a result of the disability:
 |
| * 1. The data indicate that the student’s ability to understand the impact and consequences of the behavior subject to disciplinary action:
 |
| Was impaired\_\_\_\_\_\_\_\_\_ Was not impaired\_\_\_\_\_\_\_\_ |
| * 1. The data indicate that the student’s ability to control the behavior subject to disciplinary action:
 |
| Was impaired\_\_\_\_\_\_\_\_\_ Was not impaired\_\_\_\_\_\_\_\_ |
| * 1. The disciplinary behavior was caused by or had a direct and substantial relationship to the student’s disability:

Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_ |
| 1. The behavior is a manifestation of the student’s disability if the 504 Team determines either:
 |
| 1. The answer to item 1 a, b, or c is **No**, or
2. In items 2 a or b, data indicated the student’s ability **Was impaired**.
 |
|  |
| Based on the information considered, the 504 Team determined that the behavior: |
| 🞏 was 🞏 was not a manifestation of the student’s disability |
|  |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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**Section 504**

**Public Notice**

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ school district has dedicated itself to providing equal admission opportunities, equal educational opportunities, and equal employment opportunities to all people regardless of handicap. The Board will make reasonable modifications to its programs and activities to accommodate otherwise qualified students with disabilities, unless such modifications/accommodations would impose an undue burden on the operation of the particular program, or would alter the fundamental nature or purpose of the program. No qualified person with a disability will, because the Center's facilities are inaccessible to or unusable by persons with disabilities, be denied the benefits of, be excluded from participation in, or otherwise be subjected to discrimination under any program or activity to which Section 504/ADA applies.

To this end, the Board of Education has adopted regulations, which establish procedures for the orderly settlement of complaints of students and employees of the district regarding alleged discrimination on the basis of handicap. A copy of the complete regulations may be obtained by contacting the Board of Education Administrative Offices. (If you would like additional information regarding the Federal regulations, please contact the United States Department of Education’s website at www.ed.gov.)

The Superintendent has designated the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ as the District’s Compliance Officer. The Compliance Officer may be reached at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the complaint is not satisfactorily resolved through the established district procedures, the student or employee may appeal in writing directly to the U.S. Department of Education, Region V, Office of Civil Rights, Plaza Nine Building/Room 222, 55 Erieview Plaza, Cleveland, Ohio 44114.

Section 504-11

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**Employee Complaint of Discrimination**

**on the Basis Of a Disability**

Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position and Building(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prior contacts with the District’s Compliance Officer regarding the subject of the complaint:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Discrimination alleged:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relief Requested:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Employee Date

Section 504-11

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Grievance Procedure – Employees

The following grievance procedure is available to employees for the prompt and equitable resolution of complaints alleging discrimination on the basis of disability. This grievance procedure is not available to unsuccessful applicants.

1. A person with a complaint based on alleged discrimination on the basis of disability must first discuss the problem with the District’s Compliance Officer.

2. If the informal discussion does not resolve the matter, the individual may file a written complaint, stating the nature of the issue and a proposed resolution, with the District’s Compliance Officer. The written complaint must be filed within thirty (30) days of the circumstances or event-giving rise to the grievance.

3. The District’s Compliance Officer will conduct an independent investigation of the matter (which may or may not include a hearing) and provide the grievant with a written disposition of the complaint within ten (10) working days. If no decision is rendered within ten (10) days, or the decision is unsatisfactory in the opinion of the grievant, the employee may file, in writing, an appeal with the Superintendent.

4. The Superintendent will, within ten (10) working days of receiving the written appeal, conduct a hearing with all parties involved in an attempt to resolve the complaint. The Superintendent will render his/her decision within ten (10) working days of the hearing.

5. If the grievant is not satisfied with the decision rendered by the Superintendent, s/he may, within ten (10) working days, request in writing a hearing before the Board of Education. In attempt to resolve the grievance, the Board shall meet with the concerned parties within forty (40) calendar days of the receipt of such an appeal. A copy of the Board’s disposition of the appeal shall be sent to each concerned party within ten (10) working days of this meeting.

6. If, at this point, the grievance has not been satisfactorily settled, further inquiry may be made to the Equal Employment Opportunity Commission or the Ohio Civil Rights Commission.

7. The employee may be represented at any of the above-described hearings.

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**Public Complaint About Facilities or Services**

Complainant:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Representing:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School or Facility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Prior contacts with the site administrator or the District’s Compliance Officer regarding the subject of the complaint:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Statement of Complaint:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Action Requested:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Complainant Date

Section 504-12

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**Grievance Procedure – Public Complaints about Facilities and/or Services**

Citizens of the District who have complaints about District facilities or services that have large scale impact on the District or individual may register such complaints with the site administrator or the District’s Compliance Officer. Such complaints should be filed within thirty (30) days of the circumstances or event giving rise to the grievance.

1. Complaint must contain the following information:
2. Name(s) of person(s) filing complaint.
3. Whether the person(s) represents an individual or group.
4. Whether the person(s) making the complaint has discussed the problem with the site administrator and/or the District’s Compliance Officer.
5. A written summary of the complaint and a proposed solution.
6. Processing of Complaint:
7. The complaint shall be presented in writing, with a suggested solution, to the site administrator and/or the District’s Compliance Officer. The site administrator or the District’s Compliance Officer will respond within five (5) business days.
8. If a satisfactory response is not received within five (5) business days, a copy of the complaint may be forwarded to the Superintendent, who will respond within ten (10) business days.
9. If a satisfactory response is not received within ten (10) business days, a copy of the complaint may be forwarded to the Board of Education. The Board will consider the complaint and respond within forty (40) days.
10. If a satisfactory response is not received from the Board of Education, further inquiry may be made to the U.S. Department of Education’s Office for Civil Rights. Nothing in this procedure prohibits the citizen from contacting the Office for Civil Rights at any time

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**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_School District**

**Acknowledgement of Receipt**

**of Section 504 Plan**

DATE :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FROM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District 504 Coordinator or Designee

Attached is a copy of the Section 504 plan to be implemented as a result of the Section 504 Team’s decisions regarding the following student:

Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

It is imperative that the accommodations written in the Section 504 plan be fully implemented so that the District is in compliance with Section 504, a federal law that establishes protections for students with disabilities.

Failure to comply with Section 504 law requiring rights of a student with disabilities may result in an investigation and ruling by the United States Department of Education, Office of Civil Rights (OCR). Such a ruling could result in the loss of all District federal funds as well as personal civil rights suites against District employees who fail to comply with the law.

Acknowledgement of Receipt of Section 504 Plan

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date