

Section 504 Evaluation

Date _____

Student name _____ School _____ Grade _____

Student referred by _____ Date of referral _____

Procedural Checklist: All must be checked before the evaluation may occur.

- Verify that the parent has consented to Section 504 evaluation.
- Verify that the parent has received Notice of Parent Rights under Section 504.
- Verify that the parent has been informed [in writing by phone in person] of the date, time, and place of this evaluation meeting.
- Verify Membership of the Section 504 Committee, which must include persons with knowledge of each of the following three areas: (1) the student, (2) the meaning of the evaluation data, (3) the placement options.

List Committee Members and check area of knowledge (attach an additional page if necessary to list all members)

NAME	POSITION	KNOWLEDGE OF
		<input type="checkbox"/> Child <input type="checkbox"/> Evaluation Data <input type="checkbox"/> Placement Options
		<input type="checkbox"/> Child <input type="checkbox"/> Evaluation Data <input type="checkbox"/> Placement Options
		<input type="checkbox"/> Child <input type="checkbox"/> Evaluation Data <input type="checkbox"/> Placement Options
		<input type="checkbox"/> Child <input type="checkbox"/> Evaluation Data <input type="checkbox"/> Placement Options

The Committee reviewed and carefully considered the following data which was gathered from a variety of sources, including the Referral Document. [Please check each that applies.]

- | | |
|--|---|
| <input type="checkbox"/> Grade reports
<input type="checkbox"/> Disciplinary records/referrals
<input type="checkbox"/> Standardized Tests and Other Tests
<input type="checkbox"/> School Health Information
<input type="checkbox"/> Medical evaluations/diagnoses from parents
<input type="checkbox"/> Parent Input | <input type="checkbox"/> Teacher/Administrator Input
<input type="checkbox"/> Student work portfolio
<input type="checkbox"/> Campus Study Team Suggestions
<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____ |
|--|---|

Section 504 Evaluation

(If information from a conversation or other data in unwritten form was considered, please document that oral data relied upon by attaching written notes summarizing the conversation or data.)

Based on the evaluation data gathered from a variety of sources, the Section 504 Committee answered the following questions to determine Section 504 eligibility:

- (YES) (NO) (1) Does the student have a physical or mental impairment? If so, please describe the impairment. **Note:** *This is an educational determination only, and not a medical diagnosis for purposes of treatment.* _____

- (YES) (NO) (2) Does the physical or mental impairment affect one or more major life activities. If so, which major life activity or activities is/are affected? _____

- (YES) (NO) (3) Does the physical or mental impairment substantially limit a major life activity? That is, as a result of the physical or mental impairment, is the student significantly restricted as to the condition, manner or duration under which the student can perform a particular major life activity as compared to the condition, manner, or duration under which the average student of the same age/grade level in the general population can perform that same major life activity? If yes, describe the substantial limitation.

- (YES) (NO) (4) Does the student need Section 504 services in order for his/her educational needs to be met as adequately as those of non-disabled peers? (Note: if the student's needs are so extreme as to require special education and related services, a referral to special education should be considered.)

If all four questions were answered "Yes" , the student is eligible for a free, appropriate public education under Section 504, and the Accommodation Plan should be developed. If any answer is "No", the student is not eligible.

The 504 Committee's analysis of the eligibility criteria as applied to the evaluation data indicated that:

- The student is not eligible for services under Section 504, and will continue to receive regular education and any available regular education resources and programs.
- The student is eligible under Section 504, and will receive an Accommodation Plan which governs the provision of 504 services to the student.
- The student remains eligible under Section 504, and will receive an updated Accommodation Plan which governs the provision of 504 services to the student. (Annual and 3-yr evaluations only)
- The student is no longer eligible under Section 504, and is exited from the program. The student will now receive regular education without the Section 504 services.
- Other _____

If you disagree with the Committee's decision, please contact the 504 Coordinator _____ at _____ (phone number) to discuss your concerns, or consult your Notice of Parent Rights under Section 504 for other options.

Procedural Safeguards: Verify that a copy of this completed evaluation was provided to the parent [by mail in person].