SECTION 504 – ELIGIBILITY

Student Name: **ID:**   **Date of Birth:**

Serving School: **Grade:**

Parent/Guardian: **Relationship:**

Address: , , ,   **Email:**

Home Phone:

Section 504 Eligibility Meeting Date: **Follow-up Eligibility Meeting Date:**

Purpose of Meeting:

PARENT CONTACT

Method of Contact	By	Date

Meeting Participants

Team members should include persons knowledgeable about the student, the meaning of evaluation data, and placement options.

Name/Title	Name/Title

Sources of Evaluation Information:

- ☐ academic records (grades/progress reports/test scores)
- ☐ achievement test(s)
- ☐ adaptive functioning assessment(s)
- ☐ attendance records
- ☐ behavior rating scales
- ☐ cognitive assessment(s)
- ☐ discipline records
- ☐

- ☐ functional behavioral assessment
- ☐ medical reports/health information
- ☐ motor assessment(s)
- ☐ parent input
- ☐ social developmental study
- ☐ speech/language assessment(s)
- ☐ teacher/other staff observation(s)

Summary of Evaluation Information:

Is there a Health Care Plan for this Student? ☐ Yes ☐ No

Based on the Evaluation Information reviewed:

1. Does the student have a physical or mental impairment?   ☐ Yes ☐ No

If "YES", what is the identified physical or mental impairment?

2. **Without consideration of the ameliorative effects of mitigating measures (except ordinary eye glasses and corrective lenses), does the impairment substantially limit one or major more life activities?** ☐ Yes ☐ No

   If "YES", what major life activity or activities are substantially limited?

3. **If the answers to 1 and 2 are both "Yes," does the student need accommodations and/or aids and services in order to have educational needs met as adequately as the educational needs of nondisabled peers? (NOTE: In making this determination, the Team may consider the ameliorative effects of mitigating measures that the student is using.)** ☐ Yes ☐ No

4. **Does the student need modifications to any policies, practices or procedures?** ☐ Yes ☐ No

   If "YES", what modifications are needed?

(If the answers to Questions 3 and 4 above are both "No", a 504 Plan is not required.)

Eligibility Determination:
☐ Yes
☐ No
☐ Yes - No Plan