

SECTION 504 REFERRAL

Section 504 of the Rehabilitation Act of 1973 is designed to eliminate discrimination on the basis of disability in any program or activity receiving federal financial assistance. If you feel the student identified may qualify for civil rights protection under Section 504, please complete the following information.

Student's Name _____ Grade _____ Date _____

School _____ Birth Date _____ Sex M F

Parent(s) _____ Home Phone _____ Work Phone _____

Name of Person Submitting Referral _____ Position _____

Describe the student's need or area of concern: _____

Special Education (IDEA) Status (check one box only)

- No referral to special education is necessary. No evidence exists to indicate the presence of a disability as defined by IDEA.
- The student has been evaluated by the IEP team and does not qualify for IDEA services.
- The student has received IDEA services in the past but no longer requires those services. Please check services that were provided:

<input type="checkbox"/> Resource class	<input type="checkbox"/> Self-contained class	<input type="checkbox"/> Occupational therapy
<input type="checkbox"/> Guidance	<input type="checkbox"/> Special school setting	<input type="checkbox"/> Physical therapy
<input type="checkbox"/> Speech-language	<input type="checkbox"/> Other _____	

Section 504

The student is suspected of having a physical or mental impairment that may substantially limit one or more of the following major life activities when compared to the average student:

- | | | | | |
|--|--------------------------------------|------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> caring for one's self | <input type="checkbox"/> speaking | <input type="checkbox"/> breathing | <input type="checkbox"/> eating | <input type="checkbox"/> concentrating |
| <input type="checkbox"/> performing manual tasks | <input type="checkbox"/> seeing | <input type="checkbox"/> learning | <input type="checkbox"/> sleeping | <input type="checkbox"/> thinking |
| <input type="checkbox"/> walking | <input type="checkbox"/> hearing | <input type="checkbox"/> working | | |
| <input type="checkbox"/> reading | <input type="checkbox"/> other _____ | | | |

Action Taken by Section 504 Team

- The student will be evaluated for possible Section 504 eligibility. Evaluation assignments:

- No further evaluation at this time. Explain.

Section 504 team chairperson signature

Date