

*Wakulla County School
Board*

**Procedures Relating to
Section 504 of the
Rehabilitation Act of 1973
And the Americans with
Disabilities Act
Amendments of 2008**

Revised August 2018

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SECTION 504 OF THE REHABILITATION ACT OF 1973 COORDINATORS' HANDBOOK

INTRODUCTION

Pursuant to Section 504 of the Rehabilitation Act of 1973, the District has a duty to identify, refer, evaluate and if eligible, provide a free, appropriate public education to disabled students. For additional information about the rights of parents of eligible children or for answers to any questions you might have about identification, evaluation, an placement into Section 504 Programs, please contact the District's Section 504 Coordinator, Tanya English at 850 926-0065, extension 252.

This handbook is designed to provide information concerning referral, evaluation, staffing, and 504 accommodation plans, and reevaluation procedures to school administrators, 504 contacts, referral coordinators, guidance counselors, school psychologists, social workers, and teachers.

For information regarding a student or parent alleging discrimination as it relates to Section 504 of the Rehabilitation Act or any educational program or activity, contact Executive Director of Exceptional Student Education and Student Services, Tanya English by phone at 850 926-0056, extension 9901 or email at Tanya.english@wcsb.us.

For information regarding an employee, student, parent or applicant alleging discrimination with respect to employment, contact Executive Director of Human Resources, Angela Walker, who serves as the equity coordinator for the Wakulla County School Board. She may be reached by phone at 850 926-0065, extension 9401 or emailed at angela.walker@wcsb.us.

Credits:

Guidance, forms, verbiage and support included in this manual has been provided by Exceptional Consulting Services; (ECS, Inc.); Resolutions in Special Education (RISE); and District Implementation Guide for Section 504: a Publication by Florida Department of Education, Division of Public Schools Bureau of Exceptional Education and Student Services, 2011.

SECTION 504 OF THE REHABILITATION ACT OF 1973

In 1973, the Vocational Rehabilitation Act was signed into law. As part of the Act, Congress enacted Section 504. This Section states that disabled persons cannot be discriminated against based solely on their disability. This law became the first federal civil rights law to protect the rights of disabled persons. The official name of the Act is “Nondiscrimination on the Basis of Handicap in Program and Activities Receiving or Benefiting from Federal Financial Assistance.”

IMPLICATIONS OF SECTION 504 AND IDEA

The federal government views these two requirements as different but compatible, Section 504 is a basic civil rights statement on behalf of disabled persons. IDEA 2004 (Individuals with Disabilities Education Improvement Act of 2004) is a support program to assist states and districts with the provision of a free appropriate public education (FAPE) to disabled students. Any recipient of federal education funds is bound by the requirements of Section 504.

Both programs require:

- Child identification, location, and evaluation
- Free appropriate public education
- Nondiscriminatory testing
- Procedural safeguards
- A continuum of alternative placements

DETERMINING ELIGIBILITY UNDER SECTION 504 and ADA

A student may be considered a student with a disability if the student has a mental or physical impairment that substantially limits a major life function. Students with disabilities who are not eligible under the Individuals with Disabilities Education Act (IDEA) may be eligible for services and protection including educational accommodations under Section 504 of the Rehabilitation Act of 1973. However, any student identified as a student with disability under IDEA is afforded all the protections described under Section 504.

To be eligible as a student with disabilities under 504 for services and protection against discrimination, a student must be determined, as a result of an evaluation to have a “physical or mental impairment.” That impairment must “substantially [limit] one or more major life activities,” (Section 104.3(j) (1) & (2) of Title 34). The federal regulations define physical or mental impairment as

“any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal; special sense organs, respiratory, including speech organs, cardiovascular, reproductive, digestive, genitourinary, hemic lymphatic, skin, endocrine or any mental psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.”

Major life activities include but not limited to:

- Caring for one's self
- Seeing
- Breathing
- Working
- Walking
- Performing manual tasks
- Learning
- Hearing
- Speaking

ADAAA expanded the list of major life activities to now include major bodily functions (such as the immune system and normal cell growth), sleeping, standing, lifting, bending, reading, concentrating, thinking and communicating. Interacting with others is also considered a major life activity.

The ADAAA also declared that an impairment which is episodic or in remission is a disability if it would substantially limit a major life activity when active. So conditions such as seasonal allergies, asthma, migraine headaches, or cystic fibrosis, may be considered impairments.

While neither ADAAA or Section 504 requires an evaluation on demand, students whose conditions are in full remission may not have a current need for services, but may need evaluation to determine eligibility if the conditions substantially limit a major life activity. There may be cases when a student is in remission and a parent requests an evaluation. Then the district has the option of determining the student Section 504 eligible, but not in need of services. This should be clearly documented on the forms, *Section 504 Initial Evaluation & Periodic Re-Evaluation* and *Section 504 Annual Review*.

ADAAA found at 42 USC Section 12102(4) (E) states (sic) the determination of whether an impairment substantially limits a major life activity shall be made without regard to the ameliorative effects of mitigating measures such as medication, medicinal supplies, equipment or appliances, low vision aids (excluding contact lenses or glasses), prosthetics including limbs and devices, hearing aids and cochlear implants, mobility devices, or oxygen therapy equipment and supplies. Further included is use of assistive technology, reasonable accommodations or auxiliary aids or services, and learned behavioral or neurological modifications. Health care plans may be considered mitigating measures.

Therefore, it is imperative that school districts use extreme caution in the use of the mitigating measure principle to deny disability determination for Section 504.

Services and protections under Section 504 include program accessibility, prohibition of discrimination and provision of reasonable accommodations in employment practices, and non-discriminatory practices in the area of education. The provision of a non-discriminatory education ensures that the student receives a free appropriate public education in a non-segregated educational setting and has been appropriately placed through the administration of a variety of assessments. Procedural safeguards are afforded the student and the parent. The student identified as disabled under Section 504 is also afforded an equal opportunity to participate in nonacademic and extracurricular services and activities in the same manner as nondisabled peers.

Most commonly in the area of education, schools will determine if learning, as a major life activity, is impacted by the student's disability. The Office for Civil Rights (OCR) provided

some guidance and stated, “By definition, a person who is succeeding in regular education does not have a disability which substantially limits the ability to learn.” Saginaw City (MI) Sch. Dist., EHLR 352:413 (OCR 1987).

Non-academic services may include counseling services, physical recreational athletics, transportation, health services, recreational activities, special interest groups or clubs sponsored by the schools, and employment of students including employment by the school and assistance in making employment outside the school.

A 504 Accommodation Plan may be necessary for a student determined to be a student with a disability as described in Section 504 to ensure this student has equal access to academic and non-academic educational activities.

Students identified as disabled and who have been determined eligible for exceptional student education services under IDEA are also afforded the protections under Section 504. The student with disabilities under IDEA is provided accommodations through the individual education plan (IEP) process and is not in need of a 504 Accommodation Plan.

DEFINITION OF TERMS

Qualified student: One who is of age during which non-disabled individuals are provided education services of any age during which it is mandatory under state law to provide such service to individual with disability or one who is entitled to FAPE under IDEA. For example if FAPE is provided to students ages 3-22, then a student within that age range is qualified with a disability under Section 504.

Disability: May include but is not limited to any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal; special sense organs, respiratory ,including speech organs, cardiovascular, reproductive, digestive, genito-urinary, hemic lymphatic, skin, endocrine or any mental psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

Major life activity (MLA): Include functions such as “care for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working...” This list is not exhaustive. ADAAA expanded the list of MLA’s.

Substantial limitation: The standard for substantial limitation of a student’s ability to learn is -- “by definition, a person who is succeeding in regular education does not have a disability which substantially limits the ability to learn. (Saginaw City (MI) Sch. Dist. 352 EHLR 413 (OCR 1987).)” Future ADA amendments may change the substantial limitation definition.

A substantial limitation is determined by comparing how the student functions in the affected major life activity to how the average non-disabled student functions in the same major life activity (average person in the general population). If the student suspected of a disability is functioning commensurate to the average non-disabled student, the student is likely not in need of a Section 504 plan...

Functioning below level: Students, who pass each grade while functioning further below the norm for their age, are not succeeding in general education and should be evaluated to determine eligibility for services. RtI may be considered as an evaluation process.

Temporary disability: Eligibility decisions must be made on a case-by-case basis taking into consideration the severity of the temporary impairment and how long it could potentially limit a major life activity.

Accommodation Plan: A plan developed by a team of school personnel that addresses the effects the student's disability has on his or her access to educational opportunities. The accommodations indicated on the plan should be such as to provide the child with equal access without providing the child with an undue advantage. The plan has been said to "level the playing field" for the child. The plan must address: the nature of the student's disability and the major life activity it limits; the basis for determining the disability; the educational impact of the disability; the necessary accommodations; and placement in the least restrictive environment.

Discrimination: The discrimination aspect of the Rehabilitation Act of 1973 applies to all students with disabilities. Students with disabilities cannot be otherwise denied access to a facility or a service solely due to their disability.

504 ACCOMMODATION PLAN PROCEDURES

Students determined to have a disability that affects a major life function may be in need of a 504 Accommodation Plan to provide the student access to the same educational opportunities as non-disabled students. A team of school personnel makes that determination if a student is a student with a disability, the disability affects a major life activity, and a 504 Accommodation Plan is needed to provide the student with a disability access to educational opportunities.

PARTICIPANTS

504 Contact/Designee: The principal designates a school-based person as the 504 contact/designee. This contact/designee facilitates parent and school communication, manages the organization of the written documentation, coordinates the evaluation activities, schedules 504 meetings regarding referral, evaluations, eligibility and plan reviews, and monitors the Accommodation Plan. This person is also responsible for insuring that the MIS (Management Information System) contains current data relating to students' 504 Plans.

Intervention Support Team (IST): The team should be comprised of persons knowledgeable about the student. The team may be the same persons who participate as members of the school Intervention Support Team. The team must include the 504 contact/designee, and the student's teacher. In addition, as appropriate, the team may also include administration, the guidance counselor, the school nurse, a social worker, a psychologist or school administrator, and/or a behavior specialist. Other school and district personnel as appropriate may also participate. The parents should also be a part of the team.

REFERRAL PROCESS

A student may be referred by a teacher, parent, administrator or other person with a legitimate interest and knowledge of the student. To begin the consideration process a student must be brought before the Intervention Support Team. Based on the discussion of the team, the *Section 504 Referral* and the *Wakulla County School District Section 504 Referral Intervention Support Team Summary* forms must be completed.

Information reviewed by the team may include but is not limited to the student's cumulative educational record, district and statewide assessment scores, classroom student work sample and tests, anecdotal records, medical information, input from classroom teachers and parents.

During the intervention team meeting, the team needs to address the following questions:

- What area of the student's classroom performance is of most concern?
- What interventions, methods, strategies or services have been tried in an effort to deal with the concerns? What have been the results?
- Does the student use any special accommodation in class(es)?

Parents may refer their child for consideration of 504 eligibility. Parents may provide a

private evaluation, including but not limited a medical report, a psycho-educational evaluation, neuropsychological evaluation, or a psychiatric evaluation. These reports can be considered in determining if a referral for consideration of 504 eligibility is moved forward. Regarding parent referrals, the team should ask the following questions:

- What type of disabling tendencies do you feel your child may have or exhibit?
- What are your areas of concerns regarding your child's educational performance?
- How do you believe your child's disabling tendencies affect his school performance?

Medical reports provided by the parent should include the medical diagnosis with a description of the disabling condition and the medical implication if any for instruction.

The Intervention Support Team must review the *Section 504 Referral* and determine whether to proceed with a Section 504 Evaluation. If the team decides that the process should continue, parents are provided with a copy of procedural safeguards, entitled *Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973*, along with two copies of *Notice and Consent for Initial Section 504 Evaluation* and *Parent Input for Section 504 Evaluation*. The teachers of the student are also provided with *Teacher Input for Section 504 Evaluation* in order to provide data on an instructional and behavioral rating scale.

The team may decide to proceed with an evaluation under IDEA. At this point, parents are provided with Notice of Procedural Safeguards for Parents of Students with Disabilities, and asked to sign Consent for Evaluation under IDEA and the evaluation proceeds under the process described in the Special Programs and Procedures (S P & P) Document.

Another option is for the team to decide that there is no evidence to proceed with further evaluation under Section 504. The decision is recorded on the *Wakulla County School District Section 504 Referral Intervention Support Team Summary* and filed with the *Section 504 Referral* in the student's cumulative folder of educational records.

EVALUATION

All available records and student data should be reviewed by the Intervention Support Team as part of the evaluation process. Data sources may include cumulative records, attendance records, student observations, documented interventions, standardized aptitude and achievement tests, teacher recommendations, student's physical condition, and/or medical physician's report. The team determines if any further evaluation is needed.

The team will consider a private evaluation as part of the evaluation data. If a parent provides a private evaluation, the team determines if the evaluator is a "trained clinician" with the skills necessary to make a determination as described in the DSM IV.

If the team determines that sufficient evaluation data is present to make a disability determination regarding Section 504, or that no additional evaluation data is required, the

team goes forward with the disability determination process for Section 504.

If the team determines that additional assessment information is necessary, the team will designate the team members to be involved in assessment process (psychologist, counselor, social worker, teacher, etc.). Additional assessment information may include behavior ratings forms, standard academic achievement assessments; screening for sensory or physical concerns; or medical information.

At the conclusion of the evaluation process, a Section 504 Meeting is scheduled to review evaluation findings and make a disability determination. The *Notice of Section 504 Meeting* and *Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973* are provided to the parents/guardians and the Intervention Support Team is notified of the date/time/location to convene by the school Section 504 Coordinator.

DISABILITY DETERMINATION

The team making the determination can be the same persons as those required for the Intervention Support Team assisting with the evaluation process. These participants may include parent(s) or guardian(s), administrator, a school guidance counselor, school social worker or school administrator, the student's teachers, and other appropriate personnel. However, the team must include the 504 contact/designee, persons knowledgeable about student including classroom teachers, and individuals with the authority to commit the necessary resources to implement the plan, if developed.

The Team completes *Section 504 Initial Evaluation & Periodic Re-Evaluation* to determine if student meets the requirements as a qualified student with a disability under Section 504 of the Rehabilitation Act of 1973 and the ADA.

If a student is determined to be a student with a disability as defined under Section 504, the *Wakulla School District Section 504 Referral, Notice and Consent for Initial Section 504 Evaluation, Parent Input for Section 504 Evaluation* and *Teacher Input for 504 Evaluation* and other reviewed data is filed in a teal colored folder stamped Section 504 and housed with the student's cumulative educational records. The school data entry clerk enters the data into the district MIS system. A copy of the *Section 504 Initial Evaluation and Periodic Re-evaluation* is forwarded to the Wakulla County School Board ESE/Student Services Office along with a copy of the *Section 504 Plan* if developed.

NEED FOR SECTION 504 PLAN

If the student is determined disabled under 504, the team determines if a *Section 504 Student Accommodations Plan* is needed.

- Is the disability affecting a major life activity of the student?
- Is the child learning?
- Is the child progressing adequately through the general curriculum?
- Does the student's disability prevent him or her from learning?
- Does the disability limit the student's equal access to educational opportunities?
- Based on the medical report if provided by the parent, what is the medical

implication for instruction?

Based on the answers to these questions, the team determines if the student needs a *Section 504 Student Accommodations Plan*, and if so develops the Accommodation Plan.

The disability determination and the completion of the accommodation plan, if determined appropriate, can all be scheduled for the same meeting.

ACCOMMODATION PLAN

The parents are invited to develop the plan. The Intervention Support Team develops the plan based on the student's disability and the effect of the disability on the major life activity. The student's regular teacher (s) is a key part of developing the plan and making the recommendations for the appropriate interventions. Specific accommodations that are currently provided in the classroom(s) for the student may be included on the plan. The 504 Accommodation Plan is signed by those in attendance. Parents are encouraged to actively participate. Parents receive copies of the *Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973* and a copy of the *Section 504 Accommodation Plan* at the meeting. If they are not in attendance, the *Notice of Section 504 Evaluation Results*, a copy of the *Section 504 Accommodation Plan* and *Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973* are sent home with the student.

At the conclusion of the meeting, the *504 Accommodation Plan* along with all the other documentation, including the medical statement with diagnosis; and evaluation data is placed in a "teal-colored" folder marked "Section 504" and filed in the student's educational cumulative record. The plan will also be uploaded in the district student data system. The 504 contact/designee will monitor the implementation of the plan. The 504 contact will also insure that the school data clerk is provided with data regarding plan development for entry into the student data system. A copy of the plan is provided to the district ESE/Student Services office.

What Does a Plan Look Like?

The plan assists the student with a disability in receiving equal access to educational opportunities and provides the student with the same opportunity to benefit from educational programs, services, and activities as the non-disabled peer.

The plan may address classroom accommodations in regard to

- Physical arrangements
- Assignments
- Organization
- Lesson Presentation
- Test Taking
- Behavior

The plan may address physical accommodations such as:

- Transportation
- Controlled environments
- Traveling distances
- Frequent hydration

The plan may address medical issues such as:

- Regularly scheduled time to receive insulin
- Opportunities to use inhaler
- Accommodations to address physical limitation due to disease

Implementation of the Plan

When completed, the Accommodation Plan for a specific student is provided to all relevant school personnel who are responsible for the implementation of the plan. This includes all classroom teachers of the student, and any other person who may be responsible for the implementation of the plan such as the health-care workers, social workers, guidance counselors or the district Director of Transportation. Accommodations, as appropriate are to be provided throughout the school year for the student.

Review of the Plan

The disability determination and plan review re-occurs as frequently as needed, but at least annually. This should proceed through the intervention support team process. The parent/guardian is invited to the Review Meeting, using the ***Notice of Section 504 Meeting*** checking the box indicating an Annual Review and provided with ***Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973***. The school Intervention Support Team reviews current evaluation information at the time of the annual review. The reviewed information can include but is not limited to academic progress in the classroom, standardized test scores, behavior plans, medical needs, classroom observations, work samples, etc.

The ***Section 504 Annual Review*** must be completed to determine if the student continues to have a need for accommodations and if the accommodations in place are still effective in assisting the student access to educational opportunities.

If the team reviews the ***Accommodation Plan*** and the available evaluation data, and determines the accommodations have been ineffective, the team is to revise the ***Accommodation Plan***. A revision of the plan may occur by considering different strategies, more effective accommodations based on the evaluation data or other placement options.

If the team reviews the ***Accommodation Plan*** and the available evaluation data, and determines the student is no longer disabled under Section 504, refer to the Dismissal section.

To document these activities in any of these scenarios, the team is to complete the ***Section 504 Annual Review***, which is filed in the student's teal Section 504 folder.

Copies of the revised Accommodation Plan should be sent to the district ESE/Student

Services Office and the school data clerk responsible for entering Section 504 data should update the student data system with the new plan date and next annual review date as well as other necessary data elements. In addition, the new plan should be uploaded to the student data system.

DISMISSAL

At any time the Instructional Support/504 Team may determine a student is not eligible for Section 504 or is no longer in need of an Accommodation Plan. The school 504 contact/designee will schedule and notify the parents of the meeting using the ***Notice of Section 504 Meeting***, checking the box Other and writing in Dismissal from Section 504. Parents are also provided with ***Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973***. Other meeting participants may include a school administrator, classroom teacher(s), school psychologist, school social worker, guidance counselor, and other appropriate personnel. Each case is individualized. The school 504 contact is responsible for notifying team members of the date/time/location of the meeting. As in the initial intervention team, the participants of the team must be knowledgeable about the student.

Based on the evaluation data, the team can determine that the student is no longer disabled under Section 504 and then dismiss the student. The meeting is documented on the ***Section 504 Initial Evaluation & Periodic Re-Evaluation*** form.

Appropriate signatures and the dismissal determination should be documented on the appropriate area of the form. If parents are in attendance, they are provided with ***Section 504 Initial Evaluation & Periodic Re-Evaluation*** and if not a copy is sent home with the student.

TRANSFER STUDENTS

When a student enrolls in Wakulla County Schools either from another Florida school district or from an out-of-state school district, the school asks, “Has your child received any special help or services at his/her former school?” The parent may also provide information about previous services on the Student Registration form that is completed upon entry into Wakulla County Schools. If the answer is yes, the school should attempt to determine what type of help or services was provided and contact the previous school to verify 504 eligibility.

Upon receipt of documentation of or verification of 504 eligibility, the 504 contact/designee is directed to convene an Intervention Support Team meeting as outlined in these procedures to determine if accommodations are still necessary in Wakulla County Schools.

ARTICULATION FROM SCHOOL TO SCHOOL

As students articulate from elementary to middle school or from middle school to high school, the 504 contact/designee of the sending school shall contact the 504 contact/designee at the receiving school and provide the receiving school a list of eligible Section 504 students with a current Section 504 Accommodation Plan. The plan and all other documentation regarding 504 should be filed in a teal folder stamped 504 and located with the students’ educational records. The District ESE/Student Services Office will maintain a file of Section 504 students and Accommodation Plans as well. It is necessary however for schools to notify the District ESE/Student Services Office of students transferring from one school to another as it becomes known to the 504 contact/designee in order for the data base to remain as current as possible.

DISCIPLINE

A student considered a student with a disability under Section 504 cannot be removed for a long-term period (more than 10 days) if the team determines that the behavior was a manifestation of the student’s disability. The long-term removal constitutes a change in placement and the school must review the 504 plan, re-evaluate the student and hold a manifestation determination hearing.

If however, through the manifestation determination hearing, the team determines the student’s behavior was not a manifestation of the student’s disability, the school can impose the same disciplinary action as it would for a non-disabled student.

A suspension or expulsion of a student with disabilities for more than 10 consecutive school days is considered a significant change of placement by the Office for Civil Rights, US Department of Education. In addition, in some instances, a series of short-term suspensions may also be considered a significant change of placement if the series of short-term suspensions creates a pattern of exclusion. Section 504 specifically states that a re-evaluation must be conducted for a student before the school district can make “any significant change of placement.” A long term removal or a series of short term removals is considered a change of placement.

To conduct a manifestation determination meeting, the IST team (same team members that

participate in the eligibility and plan development) must meet and complete the *Manifestation Determination Checklist for Section 504 Eligible Students*. Parents must receive adequate prior notice of the meeting by sending home *Notice of Section 504 Meeting*, checking the box in front of Manifestation Determination. A copy of *Notice of Rights for Disabled Students and their Parents Under 504 of the Rehabilitation Act of 1973* must also be provided with the meeting notice. The process is similar to the completion of the form for IDEA students with disabilities. The parent receives a copy of the completed form if they attend the meeting, and a copy is sent home with the student, if they do not. Copies of the Manifestation Determination Checklist are also filed in the student's teal 504 folder.

TESTING ACCOMMODATIONS

Florida Statutes allow for testing accommodations for students identified as students with disabilities under Section 504. The accommodations must be described in the 504 Accommodation Plan in order to be allowable on the statewide assessments. The accommodations must be provided to the student throughout the school year in the classroom setting and as part of the daily instruction.

SECTION 504 AND THE FLORIDA STATUTES

Section 504 of the Rehabilitation Act of 1973 is currently referenced in Florida Statute that relates to promotion and retention of students.

Good Cause Promotion

Students with disabilities who are eligible for Section 504 Accommodation Plans can be considered for a Good Cause Promotion as described in Section 1008.25 (6), Florida Statutes. Students with a disability with 504 Accommodation Plan and who participate in the state assessment can be provided a Good Cause Exemption. The Section 504 Accommodation Plan must reflect that the student has received intensive remediation in reading for more than 2 years, but the student still demonstrates a deficiency in reading, and the student was previously retained in Kindergarten, grade 1 grade 2, or grade 3.

Implementation Of House Bill 1329

House Bill 1329 related to McKay scholarship was passed and effective July 1, 2011. It provides for a McKay Scholarship to eligible Students With Disabilities (SWDs) who have a Section 504 plan under the conditions in the law. Information regarding this opportunity is provided to parents upon development of a Section 504 Plan. at each annual review meeting and by US mail prior to April 1 each year . For more information on McKay Scholarships, visit www.floridaschoolchoice.org.

Wakulla County School District
PROCEDURES FOR RESPONDING
TO STUDENT SERVICE ANIMAL REQUESTS

PURPOSE

The purpose of these procedures is to provide a system for responding to a request for a student with a disability to bring his/her service animal to school or to a school function or event.

GENERAL STATEMENT OF PROCEDURES

Wakulla County Schools will comply with all state and federal laws, regulations and rules regarding the use of service animals by students with disabilities under appropriate circumstances.

DEFINITION OF “STUDENT WITH A DISABILITY”

A student with a disability is defined as one who has been determined to be disabled by an appropriate team pursuant to the Individuals with Disabilities Education Act (IDEA) or Section 504 of the Rehabilitation Act (Section 504).

DEFINITION OF “SERVICE ANIMAL”

As defined by federal regulations implemented under Title II of the Americans with Disabilities Act (ADA), a service animal includes any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability including, but not limited to, a physical, sensory, psychiatric, intellectual, other mental disability or autism. Other species of animals, whether wild or domestic, trained or untrained, are not service animals for purposes of this definition. (Note: The ADA regulations also include the allowance of a “miniature horse” that is a service animal in appropriate circumstances).

DEFINITION OF “WORK OR TASKS” PERFORMED BY THE SERVICE ANIMAL

The work or tasks performed by a service animal must be directly related to the student’s disability. Examples of work or tasks include, but are not limited to, assisting individuals who are blind or have low vision with navigation and other tasks, alerting individuals who are deaf or hard of hearing to the presence of people or sounds, providing non-violent protection or rescue work, pulling a wheelchair, assisting an individual during a seizure, alerting individuals to the presence of allergens, retrieving items such as medicine or the telephone, providing physical support and assistance with balance and stability to individuals with mobility disabilities, and helping persons with psychiatric and neurological disabilities by preventing or interrupting impulsive or destructive behaviors. The crime deterrent effect of an animal’s presence and the provision of emotional support, well-being, comfort, or companionship do not constitute work or tasks for purposes of these procedures.

PROCEDURES/REQUIREMENTS

A request to bring a service animal to school or to a school function by or on behalf of a student with a disability is subject to the following procedures and requirements:

1. Parents/adult students must submit a written request to bring the service animal to school or to a school function to the school principal’s office, using the **Wakulla County School District Student Request to bring a Service Animal to School or School Function** form. Unless it is readily apparent (i.e., it can be easily observed) that the animal is trained to do work or perform tasks for the student, the request must identify and describe the service animal and what work or

task(s) the service animal is trained to perform that is/are directly related to the student's disability. In addition, the individual requesting that the service animal attend school with a student must provide documentation that the animal is properly immunized as required under state and local law and registered and licensed in accordance with all state and local animal licensing and registration requirements.

2. Requests to bring a service animal on School System property must, whenever possible, be made a reasonable time before bringing the animal school to afford the System adequate time to properly address the request and make any necessary adjustments to the educational environment to appropriately accommodate the service animal's presence. A service animal may not be on school property without prior approval by the school principal or his/her designee.
3. As part of the consideration of a request to bring a service animal to school, the School System can require proof of immunization and all animal licensing and registration requirements under applicable state and local law. In addition, individuals who have service animals are not exempt from local animal control or public health requirements.

If the parent/student refuses to provide proof of immunization or proper licensing or registration of the animal as required by state or local law, the School System may refuse to allow the student to bring the service animal to school or to a school function/event.

4. Once the School System has received a proper formal request for a student to bring a service animal to school, a meeting of the student's IEP or 504 Team (as applicable) will be scheduled and convened. The Team will conduct a case-specific inquiry as to whether the animal meets the definition of a service animal that performs work or tasks directly related to the student's disability.
5. If it is decided that the service animal will be allowed to accompany the student to school and/or to school functions/events, the Team will also discuss a plan for introducing the service animal to the school environment, any appropriate training needed for staff and students regarding interaction with the service animal, and other activities or conditions deemed necessary by the Team, including procedures for attending school functions/events (such as field trips, bus rides, etc.).
6. The issue of allowing the service animal to accompany the student to school or to a school function/event is subject to periodic review, revision or revocation by the student's IEP/504 Team at least annually and typically will be conducted when the student's IEP or 504 Plan are reviewed.
7. Service animals must wear proper identification and always have a harness, leash, tether or other form of proper restraint mechanism, unless the handler is unable because of a disability, to use a harness or other form of restraint mechanism or the use of a harness or other restraint would interfere with the service animal's safe, effective performance of work or tasks, in which case the service animal must be otherwise under the handler's control (e.g., voice control, signals, or other effective means).
8. The Wakulla County School District is not responsible for the care or supervision of a service animal. Arrangements for the care/supervision of the service animal must be made by the parent/adult student and any costs incurred to handle the service animal will be the responsibility of the parent/adult student.
9. The Wakulla County School District retains the discretion to exclude or remove a service animal from its property if:
 - a. the animal is out of control and/or the animal's handler does not effectively control the animal's behavior;

- b. the animal is not housebroken;
 - c. the animal poses a direct threat to the health or safety of others that cannot be eliminated by making reasonable modifications; or
 - d. the animal's presence would constitute a fundamental alteration in the School System's programs/activities.
10. The parent/ student, depending upon the circumstances and applicable law, may be deemed liable for any damage to school property and any injury to individuals caused by the service animal. Federal law provides that if the Wakulla County School District normally charges students for damages caused, then that student may be charged by damages caused by the service animal.
11. If it is determined that the student will not be allowed to bring his/her service animal to school or to a school function/event, that determination will be considered a grievable discrimination issue and subject to the Wakulla County School District's internal grievance procedures. Parents also may be entitled to initiate a due process hearing under the IDEA or Section 504 if they claim that the refusal constitutes a "denial of FAPE" to the student under the IDEA or Section 504. Parents may also file a Complaint with the Office for Civil Rights (OCR).

FORMS

Discipline Information (Attach copies of any behavioral plan or contract)			
Identify the behaviors exhibited by the student (check all that apply)			
Poor attention and concentration	<input type="checkbox"/>	Shifts from one uncompleted task to another	<input type="checkbox"/>
Often loses things necessary for tasks	<input type="checkbox"/>	Interrupts or intrudes on others	<input type="checkbox"/>
Excessively high/low activity level	<input type="checkbox"/>	Difficulty working with peers	<input type="checkbox"/>
Difficulty following directions	<input type="checkbox"/>	Difficulty remaining seated	<input type="checkbox"/>
Fidgets, squirms or seems restless	<input type="checkbox"/>	Confrontational/assaultive	<input type="checkbox"/>
Dress code violations	<input type="checkbox"/>	Leaves class without permission	<input type="checkbox"/>
Brings inappropriate items to school	<input type="checkbox"/>	Other	<input type="checkbox"/>
In response to these behaviors, what behavior management techniques have been attempted?			
Results of these techniques:			
Has this student been suspended, expelled or removed to an alternative placement during the previous or current school year?		N o	Yes (see below)
If yes, explain and attach copies of <i>all</i> disciplinary referrals (including those that resulted in discipline other than suspension, or expulsion). Report totaling removal days.			

Early Intervention & Alternative Programs (attach relevant plans or other documentation)			
What types of efforts have been attempted to meet the student's needs? (check all that apply)			
Alternative Learning Setting	<input type="checkbox"/>	Title I	<input type="checkbox"/>
		Summer School	<input type="checkbox"/>
		Mentoring	<input type="checkbox"/>
ESL/Bilingual Ed. Program	<input type="checkbox"/>	Tutoring	<input type="checkbox"/>
		Remediation/Credit Recovery	<input type="checkbox"/>
Other:			
If the student received assistance from the schools' problem solving team, please attach plans created for the student and data gathered on student's response.			
List services or programs considered and rejected for this student? Why?			
Has the student ever been special education eligible?		No	Yes, please attach dismissal report
Has the student ever been referred to special education?		No	Yes, please attach eligibility report

Mitigating Measures (Identify any mitigating measures currently in use by the student or provided for the student's benefit. Check all that apply, describe measure(s) in use)	
<input type="checkbox"/>	Medication:
<input type="checkbox"/>	Medical supplies, equipment, or appliances:
<input type="checkbox"/>	Low-vision devices (which do not include ordinary eyeglasses or contact lenses):
<input type="checkbox"/>	Prosthetics including limbs and devices:
<input type="checkbox"/>	Hearing aids and cochlear implants or other implantable hearing devices:
<input type="checkbox"/>	Mobility devices:
<input type="checkbox"/>	Oxygen therapy equipment and supplies:
<input type="checkbox"/>	Assistive technology:
<input type="checkbox"/>	Reasonable accommodations (includes early intervention, RTI, differentiated instruction and informal help from teachers):
<input type="checkbox"/>	Auxiliary aids or services (includes health plans, emergency plans):
<input type="checkbox"/>	Learned behavioral or adaptive neurological modifications (including dyslexia and remedial instruction):
<input type="checkbox"/>	Other:

Evaluation Data from State/District Assessment									
Last Assessment Administration School Year:			Assessment Previous School Year:			EOC School Year:			
Subject	Level	Scale Score	Subject	Level	Scale Score	Subject	Pass? (Y/N)	Level	
Reading			Reading						
Mathematics			Mathematics						
Writing			Writing						
Science			Science						

Over time, this student's test scores: (check the appropriate box)			
have become better each year		have stayed about the same each year	
dropped suddenly in ___ grade		data not available	
Compared to the mean of the district/school/classroom, this student's test scores: (circle comparison group and check the appropriate box)			
improved each year		stayed about the same each year	
		worsened each year	
Other:			

Health Information Person conducting screening:			
Attach information relating to any doctor's order, diagnoses, or evaluation pertaining to disability (example, medical reports, psychological reports, ADD/ADHD diagnostic information, etc.)			
Does student exhibit any signs of health or medical problems?		No	Yes. If yes, attach observations.
Is there a need for further assessment of referral of a medical problem?		No	Yes (see below)
If further assessment is necessary, please describe what new data is necessary.			
Is student receiving any medication at school?		No	Yes, list medications
Does the student require adaptive equipment or facility adaptation?		No	Yes, attach list of needs
Does the student have a physical or mental impairment that is episodic?		No	Yes
If yes, please describe the condition, when and how often it is active, and its impact on the student when it is active.			
Does the student have a physical or mental impairment that is in remission?		No	Yes
If yes, please describe the condition, when it was active, at what point it went into remission, and its impact on the student when it was active.			

Vision Type of screening:		Date of screening	
<i>(Vision examination must have been administered within a year from the date of referral)</i>			
Visual acuity before correction:	Right _____	Left _____	
Visual acuity with correction:	Right _____	Left _____	
Interpretation of results:			
Does student exhibit any signs of health or medical problems?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes. If yes, attach observations.
Is there a need for further assessment of a medical problem?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes (see below)
If further assessment is necessary, please describe what new data is necessary.			
As a result of the screening, is there any indication of a need for further assessment or adjustment?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes, please explain.
Has any follow-up treatment been recommended?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes, please explain.

Hearing Date of most recent screening:	Type of screening:		
Results:			
Interpretation of results:			
As a result of the screening, is there any indication of a need for further assessment or adjustment?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes. If yes, explain.
Has any follow-up treatment been recommended?	<input type="checkbox"/>	No <input type="checkbox"/>	Yes, please explain.

Wakulla County School District Section 504 Intervention Support Team Summary

Student: _____ Birthdate: _____

IST Section 504 Referral Date: _____

School: _____ Grade: _____

Teacher: _____

Teacher: _____

Teacher: _____

Document the Recommendations of the Intervention Support Team: Summarize the IST recommendations			
<input type="checkbox"/>	The Section 504 Referral indicates a need for Section 504 Evaluation		
	<input type="checkbox"/>	Notice of Rights provided to parents	
	<input type="checkbox"/>	Parental Notice for Section 504 Evaluation provided to parents	
	<input type="checkbox"/>	Parental Input provided to parents for Section 504 Evaluation	
<input type="checkbox"/>	The Section 504 Referral indicates a need for Evaluation for services under IDEA		
	<input type="checkbox"/>	Notice of Procedural Safeguards for Parents of Students with Disabilities is provided	
	<input type="checkbox"/>	Consent for Evaluation under IDEA is provided	
<input type="checkbox"/>	The Section 504 Referral does not indicate a need for additional evaluation at this time		
Document the Team Members Participation			
<i>Signature</i>	<i>Printed Name</i>	<i>Title</i>	<i>Date</i>
		Referral Coordinator	
		School Psychologist	
		ESE Program Specialist	
		Regular Ed. Teacher	
		Speech/Language Therapist	
		ESE Teacher	
		School Social Worker	
		School Administrator	
		IST Coordinator	
		Parent	
		Other	
		Other	
Comments: _____ _____ _____			

**Notice of Rights for Disabled Students and their Parents
Under §504 of the Rehabilitation Act of 1973**

The Rehabilitation Act of 1973, commonly known in the schools as “Section 504,” is a federal law passed by the United States Congress with the purpose of prohibiting discrimination against disabled persons who may participate in, or receive benefits from, programs receiving federal financial assistance. In the public schools specifically, §504 applies to ensure that eligible disabled students are provided with educational benefits and opportunities equal to those provided to non-disabled students.

Under §504, a student is considered “disabled” if he or she suffers from a physical or mental impairment that substantially limits one or more of their major life activities, such as learning, walking, seeing, hearing, breathing, working, and performing manual tasks. Section 504 also applies to students with a record of having a substantially-limiting impairment, or who are regarded as being disabled even if they are truly not disabled. Students can be considered disabled, and can receive services under §504, even if they do not qualify for, or receive, special education services.

The purpose of this Notice is to inform parents and students of the rights granted them under §504. The federal regulations that implement §504 are found at Title 34, Part 104 of the Code of Federal Regulations (CFR) and entitle eligible student and their parents, to the following rights:

- 1.** You have a right to be informed about your rights under §504. [34 CFR 104.32] The School District must provide you with written notice of your rights under §504 (this document represents written notice of rights as required under §504). If you need further explanation or clarification of any of the rights described in this Notice, contact appropriate staff persons at the District’s §504 Office and they will assist you in understanding your rights.
- 2.** Under §504, your child has the right to an appropriate education designed to meet his or her educational needs as adequately as the needs of non-disabled students are met. [34 CFR 104.33].
- 3.** Your child has the right to free educational services, with the exception of certain costs normally also paid by the parents of non-disabled students. Insurance companies and other similar third parties are not relieved of any existing obligation to provide or pay for services to a student that becomes eligible for services under §504. [34 CFR 104.33].
- 4.** To the maximum extent appropriate, your child has the right to be educated with children who are not disabled. Your child will be placed and educated in regular classes, unless the District demonstrates that his or her educational needs cannot be adequately met in the regular classroom, even with the use of supplementary aids and services. [34 CFR 104.34].
- 5.** Your child has the right to services, facilities, and activities comparable to those provided to non-disabled students. [34 CFR 104.34].
- 6.** The School District must undertake an evaluation of your child prior to determining his or her appropriate educational placement or program of services under §504, and also before every subsequent significant change in placement. [34 CFR 104.35].
- 7.** If formal assessment instruments are used as part of an evaluation, procedures used to administer assessments and other instruments must comply with the requirements of §504 regarding test validity, proper method of administration, and appropriate test selection. [34 CFR 104.35]. The District will

appropriately consider information from a variety of sources in making its determinations, including, for example: aptitude and achievement tests, teacher recommendations, reports of physical condition, social and cultural background, adaptive behavior, health records, report cards, progress notes, parent observations, and scores on TAKS tests, and mitigating measures, among others. [34 CFR 104.35].

8. Placement decisions regarding your child must be made by a group of persons (a §504 committee) knowledgeable about your child, the meaning of the evaluation data, possible placement options, and the requirement that to the maximum extent appropriate, disabled children should be educated with non-disabled children. [34 CFR 104.35].

9. If your child is eligible for services under §504, he or she has a right to periodic evaluations to determine if there has been a change in educational need. Generally, an evaluation will take place at least every three years. [34 CFR 104.35].

10. You have the right to be notified by the District prior to any action regarding the identification, evaluation, or placement of your child. [34 CFR 104.36]

11. You have the right to examine relevant documents and records regarding your child (generally documents relating to identification, evaluation, and placement of your child under §504). [34 CFR 104.36].

12. You have the right to an impartial due process hearing if you wish to contest any action of the District with regard to your child's identification, evaluation, or placement under §504. [34 CFR 104.36]. You have the right to participate personally at the hearing, and to be represented by an attorney, if you wish to hire one.

13. If you wish to contest an action taken by the §504 Committee by means of an impartial due process hearing, you must submit a Notice of Appeal or a Request for Hearing to the District's §504 Coordinator at:

*Wakulla County School District Section 504 Coordinator
Wakulla County School Board
69 Arran Road
Crawfordville, FL 32327*

A date will be set for the hearing and an impartial hearing officer will be appointed. You will then be notified in writing of the hearing date, time, and place.

14. If you disagree with the decision of the hearing officer, you have a right to seek a review of that decision before a court of competent jurisdiction (normally, your closest federal district court).

15. You also have a right to present a grievance or complaint to the District's §504 Coordinator (or designee), who will investigate the situation, take into account the nature of the complaint and all necessary factors, and respond appropriately to you within a reasonable time.

16. You also have a right to file a complaint with the Office for Civil Rights (OCR) of the Department of Education. The address of the OCR Regional Office that covers this school district is: *Director, Office for Civil Rights, 61 Forsyth St. S.W., Suite 19T70, Atlanta, GA 30303-8927, Tel. 404-974-9406*

Initial as completed
_____ 2 Copies sent to parent
_____ 1 Copy signed & returned
_____ Notice of Rights Included

**Wakulla County School Board
Notice and Consent for Initial Section 504 Evaluation**

Date Sent/Mailed:	Student's Name:	
District/School:	Grade:	Student ID #:
Parents:		
Address:		
Home Phone:	Work Phone:	

We have carefully reviewed your child's school records and information from teachers. Additional information is necessary to determine your child's educational needs and whether he/she might be eligible for assistance in the regular classroom under Section 504. We ask that you consent to an evaluation under §504 for the following reasons _____

In many cases, the §504 evaluation may simply consist of the Section 504 Committee reviewing and interpreting existing school records, including anecdotal evidence, observations, prior testing, grades, standardized test scores, and other data, in order to determine if your child qualifies for accommodations in the regular classroom. For students who have been involved in the early intervention process, the 504 evaluation will include a review of the classroom assistance and interventions provided, the results of those efforts, and any other data generated by that process. In addition to reviewing the data described above, the district desires to conduct the following assessments:

Please review the enclosed document entitled "Notice of Parent Rights," which informs you of your rights under Section 504. If you CONSENT to the evaluation, please check the "consent" statement, sign and return one copy of this letter. If you REFUSE consent, please check the "refuse consent" statement, sign and return one copy of this letter. Keep the other copy of this letter and the Notice of Parent Rights for future reference.

Please call _____ (Coordinator) at _____ if you have any questions.

As the parent/legal guardian of the above referenced student, I have received notice of my Section 504 parent rights, and I understand that this is *not* an offer of a Special Education evaluation.

___ I hereby CONSENT to an evaluation under Section 504.

___ I hereby REFUSE consent to an evaluation under Section 504.

Parent/Guardian signature

Parent/Guardian printed name

Date

Wakulla County School Board Parent Input for Section 504 Evaluation

The information requested will greatly assist the §504 Committee in evaluation of your child. If you have additional information that you want the Committee to consider (and that is not requested here) please feel free to attach additional pages. Disregard any question that makes you uncomfortable. If you would prefer to provide this information by phone, please contact _____ at _____.

Student Name:	Date of Birth:
Address:	Phone:
School:	Grade:

General Information			
Mother's Name:			
Occupation:		Level of Education	
Father's Name			
Occupation:		Level of Education	
With whom does the child live?		Relationship to child:	
Other Children in the Home (attach additional page if necessary)			
Name	Age	Relationship	
Other Adults in the student's Home		Relationship to student	
Compared to other children in the family, this child's development was: (check one)			
Slower	About the same	Faster	
At what age, in months, was the student able to do the following:			
Sat without support		Crawled	
Used spoon fairly well		First word	
		Walked without support	
		Reasonably well-toilet trained	

The Student's Friends & Activities			
Does the student prefer to play/socialize with	Girls	Boys	No preference
Does the student have friends his/her own age?	Yes	No	
Does the student have friends who are younger than the student?	Yes	No	
Does the student have friends who are older than the student?	Yes	No	

The Student at Home				
Please check each item available for the student's use at home:				
Computer	Books	Tape recorder	CD player	
Video games	Television	Educational toys	Radio	
What kinds of activities does your family do together? (Read, play games, camp, etc.)				
Have there been any important changes within the family during the last three years (For example, changes, moves, births, deaths, serious illnesses, separations, divorce)				
With whom in the family is the student particularly close?				
Has the student ever been separated from the family due to family problem, health reasons, etc? If yes, please explain.				
How did the student react to the separation?				
Describe the student's behavior at home with peers, siblings, neighbors, and parents. (For example, is the student generally well-behaved? Social? Affectionate? Withdrawn?)				
What methods of discipline are used with this student at home? (For example, spanking, extra chores, early bedtimes, taking away of privileges; is he/she given rewards for good behavior?)				
How does the student react to discipline?				
Who usually disciplines the student at home?				
The primary language in the home is:				
How long has the student lived in the United States?				
What time does the student go to bed at night?		Does the student eat breakfast?		
What does the student do when not in school? (Please list the student's common indoor and outdoor activities.)				
Does your student have a part-time job after school or on weekends? If yes, please provide the average number of hours worked per week.				

The Student at School				
Has your student talked to you about difficulties or problems at school? Please explain:				
Do you think your student is having difficulties in school?			Yes	No
If you think your student is having difficulties, please explain your concerns.				

What do you think is causing the student's difficulties at school?

When did you first notice the difficulties?

If you have discussed these concerns with the school, please indicate when and with whom you shared your concerns:

If your student qualifies for Section 504, what services or accommodations do you think are necessary so that the student can participate and benefit from school?

Childhood & Medical History				
Has your student ever had the following?	Never	Began at age?	Ended at age?	Still has problem
Frequent fevers				
Frequent earaches				
Frequent vomiting				
Thumbsucking				
Nightmares				
Sleepwalking				
Head banging				
Rocking of body				
Teeth grinding				
Bedwetting				
Fingernail biting				
Temper tantrums				
Run away from home				
Lost consciousness				
Convulsions				

Current Medical Treatment & Medication

Doctor's reports, letters and diagnoses can be very helpful to the 504 Committee. Please attach the student's medical records so that the Committee can have a more complete picture of your child. If you would prefer, you may give the District written consent to seek those records from your doctors directly.
Please notify _____ (504 Coordinator) at _____ to get the necessary form.

Please identify any medical problem for which your student is currently receiving medical care:

Does your student appear to have any other physical health problems for which the student is not currently receiving medical care?

Please list all medications currently taken by your student (over the counter and prescription).

Please describe any side effects the student experiences from these medications.

Please identify any medication(s) taken by your student for over 1 year:

Please describe any hospital stays by your student, including the date, reason for the stay, the duration, and the result of treatment.

Does your child have a medical condition or illness with symptoms that are sometimes more serious than other times? If yes, please answer the following questions:

What is the name of the condition or illness?

When and how often is the condition or illness a problem for your child?

How does the condition or illness affect your child when the symptoms are most serious?

Did your child used to have a serious medical condition or illness that has gone away? If yes, please answer the following questions:

What is the name of the condition or illness that your child used to have?

When did your child suffer from the condition or illness?

How did the condition or illness affect your child when the symptoms were most serious?

Is the condition or illness likely to return?

Is there any other information about your student or family that you would like the Section 504 Committee to consider when evaluating your student for Section 504 eligibility? If so, please provide it here.

Signature of Parent

Date

Signature and Position of
person assisting (if any)

Date

Wakulla County School Board Teacher Input for Section 504 Evaluation

Student Name:	Student ID #:	Grade:
Teacher's Name:	Subject Matter:	Date:

Instructional Rating													
Rate the concerns you have about this student. For each skill, mark: 1= Poor 2=Below Average 3=Average 4=Above Average 5=Superior N=Not observed													
	1	2	3	4	5	N		1	2	3	4	5	N
Reading Skills							Tests						
Math Skills							Follows oral directions						
Written Expression							Follows written directions						
Spelling							Organizational skills						
Classroom work							Interaction with staff						
Homework													

Behavioral Rating							
Rate this student's behavior in relation to other students of the same AGE. For each behavior, mark: 1= Poor 2=Below Average 3=Average 4=Above Average 5=Superior N=Not observed							
	1	2	3	4	5	N	
Generally cooperates or complies with teacher requests.							
Adapts to new situations without getting upset.							
Accepts responsibility for own actions.							
Makes and keeps friends at school.							
Works cooperatively with others.							
Has an even, usually happy, disposition.							
Appropriate attention and concentration							
Compliance with teacher directives							
Brings necessary materials to class							
Fidgets, squirms or seems restless							
Completes tasks on time							
Stays on task, is easily redirected							
Remains seated							
Takes turns, waits for turn							

What have you done differently in your classroom to meet this student's educational/behavioral needs?

What were the results of these efforts?

**Wakulla County School Board
Notice of Section 504 Meeting**

Date: _____

Student's Name	ID #	School
----------------	------	--------

Dear Mr./Mrs./Ms. _____
Parent/Guardian/Surrogate/Adult Student

This letter is to inform you that the Section 504 Committee is planning a meeting to discuss your child's educational needs. We have scheduled a meeting at (time)_____, on (date) _____, at (location)_____. While parents are not required members of Section 504 Committees, we would very much appreciate your input. Your insights and contributions will be quite helpful to us in effecting the best decisions possible.

The meeting is scheduled for the following reason[s]:

- Initial evaluation for eligibility
- Annual Review (no Periodic Re-Evaluation is due)
- Periodic Re-Evaluation (every three years)
- Manifestation Determination (prior to disciplinary removal constituting a change in placement)
- Other: _____

Following the meeting, we will notify you of the Section 504 Committee's decision in writing. Please call me at _____if you have any questions.

Sincerely,

Section 504 Coordinator

Wakulla County School Board Section 504 Initial Evaluation & Periodic Re-Evaluation

Student:	Student ID #:	Date of Birth:
Grade:	School/District:	Previous School/District:
Today's Date:	(Check one): Initial Evaluation	Periodic Re-Evaluation
For Initial Evaluation Only: Referred by:		Date of Referral:

§504 Committee Membership:

By regulation, the Section 504 Committee is a group of knowledgeable people. Within the group, each required type of knowledge must be present. List each member attending and check the area of knowledge each provides (attach an additional sheet if necessary). Each required area of knowledge must be present on the committee.

Name	Position/Title	This member has knowledge of		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Procedural Checklist:

For the §504 Initial Evaluation, complete Questions 1-5. If this is a Re-Evaluation, there is no requirement for parental consent (mark Question 1 "N/A", and complete the other four questions). Please verify by checkmark that each requirement is completed before proceeding.

1. Verify that the parent consented to §504 <i>initial</i> evaluation, Form 3 (<i>Does not apply to re-evaluations</i>)	<input type="checkbox"/>
2. Verify that the §504 Committee is a group, including a person with knowledge in each of the required areas.	<input type="checkbox"/>
3. Verify the Student's dominant language: _____ Dominant language of the home: _____	<input type="checkbox"/>
4. Verify that the parent received Notice of Parent Rights under §504	<input type="checkbox"/>
5. Verify <i>how</i> the parent was informed of the date, time, and place for this evaluation (check one)	<input type="checkbox"/>
In writing <input type="checkbox"/> By Phone <input type="checkbox"/> In Person <input type="checkbox"/> Other: _____	<input type="checkbox"/>

Evaluation Data Considered from a Variety of Sources

The Committee reviewed and carefully considered data gathered from a variety of sources, including the Referral Document. [Please check each type of data reviewed by the Committee, or attach copies of the data.]

Parent input	<input type="checkbox"/>	Student work portfolio	<input type="checkbox"/>
Grade reports	<input type="checkbox"/>	Special education records (specify)	<input type="checkbox"/>
Standardized Tests and Other Tests	<input type="checkbox"/>	Disciplinary records/referrals	<input type="checkbox"/>
Early Intervention data	<input type="checkbox"/>	Mitigating measures	<input type="checkbox"/>
Teacher/Administrator Input	<input type="checkbox"/>	Other	<input type="checkbox"/>
School Health Information	<input type="checkbox"/>	Other	<input type="checkbox"/>
Medical evaluations/diagnoses	<input type="checkbox"/>	Other	<input type="checkbox"/>

NOTE: 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.)

Section 504 Eligibility Determination					
As directed by Congress in the ADAAA, the Section 504 Committee understands that the definition of disability “shall be construed in favor of broad coverage of individuals under this Act, to the maximum extent permitted by the terms of this Act.”					
1. Does the student have a physical or mental impairment? If so, please identify the impairment(s) in the box below. <i>Notes (1) This is an educational determination only, and not a medical diagnosis for purposes of treatment. (2) Impairments that are episodic, in remission or mitigated should also be listed.</i>					Eligibility Question #1
					Yes <input type="checkbox"/> No <input type="checkbox"/>
If you answered “yes” to Question 1, identify the impairment(s) here.					
2. Does the physical or mental impairment affect one or more major life activities (including major bodily functions)? If so, identify the major life activity or major bodily function by checking the appropriate box or boxes. <i>Note: For an impairment that is episodic, in remission, or mitigated, identify the activity or function affected when the disability was present or active.</i>					Eligibility Question #2
					Yes <input type="checkbox"/> No <input type="checkbox"/>
Major Life Activities include, but are not limited to:					
Caring for oneself		Eating		Lifting	
Performing manual tasks		Sleeping		Reading	
Seeing		Walking		Concentrating	Other: <input type="checkbox"/>
Hearing		Standing		Thinking	Other: <input type="checkbox"/>
Major Bodily Functions include, but are not limited to:					
Functions of the immune system		Bowel function		Brain function	Endocrine function
Normal cell growth		Bladder function		Respiratory function	Digestive function
Reproductive function		Neurological function		Circulatory function	Other: <input type="checkbox"/>
3. Does the physical or mental impairment <i>substantially limit</i> a major life activity? <i>Notes: (1) “Substantially limits” does not mean “significantly restricted.” (2) The ADAAA requires that when making this determination, the Committee should not consider the ameliorative (helpful or positive) effects of mitigating measures (except for ordinary eyeglasses or contact lenses). (3) The fact that the impairment is episodic (the impact of the impairment is sometimes substantially limiting, but not always), or in remission, does not preclude eligibility if the impairment would substantially limit a major life activity when active.</i>					Eligibility Question #3
					Yes <input type="checkbox"/> No <input type="checkbox"/>
If Eligibility Question 3 is answered “no,” explain why the student is not substantially limited and describe how the committee addressed the positive impact of mitigating measures (what measures are used by/for the student, and what was their impact?):					

<p>Section 504 Accommodation Plan & Placement (completed only if each of the three preceding questions were answered “Yes.”).</p> <p>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? <i>Notes: (1) If the student’s needs are so extreme as to require special education and related services, a referral to special education should be considered. (2) If the student’s impairment is in remission, or the student’s needs are currently addressed by mitigating measures, the student is not in need of a Section 504 accommodation plan.</i></p> <p>If the Plan and Placement question is answered “no,” explain why the student does not need a Section 504 Accommodation Plan:</p>	Plan & Placement Question		
	Yes	<input type="checkbox"/>	No

<p>Analyzing the Results of the Committee’s Answers</p> <p>1. If all four questions are answered “YES”, the student is eligible for both the nondiscrimination and FAPE (Section 504 accommodation plan) protections of Section 504. The Section 504 Committee will create a Section 504 Services plan for this student.</p> <p>2. If only the first three questions are answered “YES”, the student is eligible for the nondiscrimination protections of Section 504, together with manifestation determination, procedural safeguards, and periodic Re-Evaluation or more often as needed. The Section 504 Committee will not create a Section 504 accommodation plan at this time as the student’s needs are currently being met as adequately as his nondisabled peers. Should such a need develop, the §504 Committee shall re-convene and develop an appropriate Section 504 accommodation plan at that time.</p> <p>3. If any of the first three answers is “NO”, the student is not eligible for Section 504 nondiscrimination protection and is not eligible for a Section 504 accommodation plan.</p>	
<p>Section 504 Committee’s Decision</p> <p>The Section 504 Committee’s analysis of the eligibility criteria as applied to the evaluation data indicates that at this time (check the appropriate box or boxes):</p>	
<p>Not §504 Eligible. The student is not eligible under Section 504.</p>	<input type="checkbox"/>
<p>§504 Eligible + Plan. The student is eligible under Section 504, and will receive a Section 504 accommodation plan that governs the provision of a free appropriate public education to the student. The student will receive manifestation determination, procedural safeguards, periodic Re-Evaluation or more often as needed, as well as the nondiscrimination protections of Section 504.</p>	<input type="checkbox"/>
<p>§504 Eligible + No Plan (In Remission). The student is eligible under Section 504, but will not require a Section 504 accommodation plan because the physical or mental impairment is in remission, and there is no current need for services. The student will receive manifestation determination, procedural safeguards, periodic Re-Evaluation or more often as needed, as well as the nondiscrimination protections of Section 504. Should need for a plan develop, the Section 504 Committee shall reconvene and develop an appropriate Section 504 accommodation plan.</p>	<input type="checkbox"/>
<p>§504 Eligible + No Plan (Mitigating Measures). The student is eligible under Section 504, but will not require a Section 504 accommodation plan because the student’s needs are met as adequately as his nondisabled peers due to the positive effect of mitigating measures currently in use. The student will receive manifestation determination, procedural safeguards, periodic Re-Evaluation or more often as needed, as well as the nondiscrimination protections of Section 504. Should need for a plan develop, the Section 504 Committee shall reconvene and develop an appropriate Section 504 accommodation plan.</p>	<input type="checkbox"/>
<p>Continued §504 Eligibility. The student remains eligible under Section 504, and will receive an updated Section 504 accommodation plan that governs the provision of a free appropriate public education to the student. The student will receive manifestation determination, procedural safeguards, periodic Re-Evaluation or more often as needed, as well as the nondiscrimination protections of Section 504. (For use with Re-Evaluations).</p>	<input type="checkbox"/>

Section 504 Committee's Decision (continued)	
Dismissal from §504. The student is no longer eligible for Section 504 and is exited from the program. The student will now receive regular education without Section 504 services. The student will receive the nondiscrimination protections of Section 504 as a student with a record of an impairment, together with procedural safeguards, but will not receive manifestation determination, or periodic Re-Evaluation.	
IDEA Eligible & §504 Dismissal. The student has been determined special education eligible by a Committee/IEP team. Consequently, the student is no longer served through a Section 504 Committee and is exited from the program. The student will receive a free appropriate education through the Committee/IEP team, together with the nondiscrimination protections and procedural safeguards of Section 504.	
Other (please describe)	

Additional notes or explanations by the Committee:

**Wakulla County School Board
Notice of Section 504 Evaluation Results**

Date

Dear Parent/Guardian/Adult Student,

This letter is to inform you that the Section 504 Committee had a meeting on _____ to discuss your student _____ (student's name). A copy of the evaluation form is attached. After careful review of relevant evaluation data indicated on page 1, the Section 504 Committee analyzed the data to answer the Section 504 eligibility questions on page 2. While the evaluation document provides more detail on the Committee's decision, by way of summary, the Committee determined that

_____ (provide brief summary of decision)

A copy of the §504 Committee's evaluation is enclosed. If your student was determined §504-eligible, and in need of Section 504 accommodation plan, a copy of your student's §504 accommodation plan is also attached.

If you have any questions concerning this decision, please call me at _____.

I will be more than happy to discuss any questions that you may have.

Sincerely,

Section 504 Coordinator

- Encl. (1) Completed Initial Evaluation or Re-Evaluation
(2) Section 504 accommodation plan (if Section 504-eligible, and in need of a Plan)

**Wakulla County School Board
Section 504 Student Accommodation Plan**

Date:

Student Name:	Date of Birth:
Student ID:	Phone:
School:	Grade:

Type of meeting generating initial plan or changes to 504 plan	
	Initial Evaluation
	Annual Review
	Failure or Discipline Review
	Three Year Reevaluation
	Other:

Indicate the duration of this plan if impairment is temporary (less than 6 months)
Beginning Date:
Ending Date:
Describe the Temporary Disability:

Certificate of Plan Distribution (Please indicate date distributed to parent and each person responsible for plan implementation, or N/A as appropriate)			
Date	Person Responsible	Date	Person Responsible
	Parent/Adult Student		Administrator
	English/Language Arts teacher		Counselor
	Math teacher		Other:
	Science teacher		Other:
	Social Studies teacher		Other:
	PE teacher		Other:
	Fine Arts teacher		Other:
	Vocational teacher		Other:
Signature of 504 Coordinator or other person verifying delivery of plan:			

Matching of Need and Accommodations. Please use the following tool to ensure that each of the student's needs identified in the evaluation are addressed in the accommodation plan. (Attach additional pages where necessary).	
Each student need identified by the evaluation	Accommodation(s) designed to address the need
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

Wakulla County School Board Section 504 Behavior Intervention Plan

[This form should be used when the §504 team determines that regular discipline is inappropriate]

Student Name:		Student ID:	
School:			
Date of Plan:			
Please list below each behavior, reinforcement, consequence and person responsible for administering the reinforcement or consequence. Appropriate intervention is based on assessment data, discipline history, social history, parent reports and other data.			
Behaviors targeted for intervention:			
Please select or add the appropriate behavior interventions for this student. Please use the notes and information page to explain choices and to ensure compliance.			
<input type="checkbox"/>	Clearly defined limits	<input type="checkbox"/>	Journal of daily behaviors
<input type="checkbox"/>	Frequent reminder of rules	<input type="checkbox"/>	Reinforce appropriate behavior
<input type="checkbox"/>	Reduce distracting stimuli	<input type="checkbox"/>	Supervised unstructured time
<input type="checkbox"/>	Consistent routine	<input type="checkbox"/>	Behavioral contract (attach)
<input type="checkbox"/>	Other	<input type="checkbox"/>	Other
<input type="checkbox"/>		<input type="checkbox"/>	Proximity seating
<input type="checkbox"/>		<input type="checkbox"/>	Cooling off period
<input type="checkbox"/>		<input type="checkbox"/>	Peer intervention
<input type="checkbox"/>		<input type="checkbox"/>	Other
<input type="checkbox"/>		<input type="checkbox"/>	Other
Communicate behavioral progress or status with parents through (check one):			
<input type="checkbox"/>	Weekly tracking form	<input type="checkbox"/>	Notes home
<input type="checkbox"/>	Daily tracking form	<input type="checkbox"/>	Email
<input type="checkbox"/>		<input type="checkbox"/>	Phone call
<input type="checkbox"/>		<input type="checkbox"/>	Parent conference
When a communication other than a tracking form is chosen, describe the frequency of required contact here (when particular behaviors occur, every two weeks, etc).			
When a targeted behavior occurs, the following occurs:			
Targeted Behavior	Reward for desired behavior	Consequence for undesired behavior	Person responsible for Reward or consequence

Wakulla County School Board
Section 504 Annual Review
 (Short-form for both Annual and “As Needed” Re-Evaluations)

Student:	Student ID #:	Date of Birth:
Grade:	School/District:	Today’s Date:

Explanation of “Annual Review.”

Although an Annual Review is not required by federal law, the school believes that conducting Annual Reviews, or Annual Re-Evaluations, is a best practice to ensure that student needs are met on an on-going basis and that changes to either the student’s condition or need for services are recognized and addressed expeditiously. This form is also appropriate for other reviews as warranted by changes in the student’s condition or need for services (“As Needed” Reviews or “As Needed” Re-Evaluations). For Periodic Re-Evaluations, required by the Section 504 regulations at least every three years, or situations where the Annual Review Form is inappropriate (as determined by the screening questions below) please use **WCSB Section 504 Initial Evaluation & Periodic Re-evaluation**.

§504 Committee Membership:

By regulation, the Section 504 Committee is a group of knowledgeable people. Within the group, each required type of knowledge must be present. List each member attending and check the area of knowledge each provides (attach an additional sheet if necessary). Each required area of knowledge must be present on the committee.

Name	Position/Title	This member has knowledge of
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options

Procedural Checklist:

In addition to proper membership, three things must be verified before the Annual Review can be completed. (Questions 1-4). Please verify by checkmark that each requirement is completed before proceeding.

1. Verify that the §504 Committee is a group, including a person with knowledge in each of the required areas.									
2. Verify that the parent received Notice of Parent Rights under §504									
3. Verify <i>how</i> the parent was informed of the date, time, and place for this evaluation (check one)									
<table style="display: inline-table; border: none;"> <tr> <td style="border: none; padding: 0 10px;">In writing</td> <td style="border: none; padding: 0 10px;"><input type="checkbox"/></td> <td style="border: none; padding: 0 10px;">By Phone</td> <td style="border: none; padding: 0 10px;"><input type="checkbox"/></td> <td style="border: none; padding: 0 10px;">In Person</td> <td style="border: none; padding: 0 10px;"><input type="checkbox"/></td> <td style="border: none; padding: 0 10px;">Other:</td> <td style="border: none; padding: 0 10px;"><input type="checkbox"/></td> </tr> </table>	In writing	<input type="checkbox"/>	By Phone	<input type="checkbox"/>	In Person	<input type="checkbox"/>	Other:	<input type="checkbox"/>	
In writing	<input type="checkbox"/>	By Phone	<input type="checkbox"/>	In Person	<input type="checkbox"/>	Other:	<input type="checkbox"/>		
4. Verify that use of the Annual Review form is appropriate by completing the following screening questions. The Committee should answer each question by analyzing the most recent full evaluation (either the Initial Section 504 evaluation, or the most recent Section 504 Re-Evaluation, whichever is newer):									

<p>(A) Is the student’s Initial Evaluation or periodic Re-Evaluation less than three years old? If the answer is no, this form should not be used, and the Section 504 Committee should complete Form XV, the Re-Evaluation form.</p>	Appropriateness of Short Form Question 4A				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>
Yes	No				
<input type="checkbox"/>	<input type="checkbox"/>				
<p>(B) Generally speaking, does the student’s most recent Initial or periodic Re-Evaluation accurately reflect all of the student’s physical or mental impairments, including impairments that are episodic and impairments in remission? If yes, the student remains Section 504 eligible. If the answer is no, the Committee should conduct a full Re-Evaluation.</p>	Appropriateness of Short Form Question 4B				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>
Yes	No				
<input type="checkbox"/>	<input type="checkbox"/>				

<p>(C) Generally speaking, does the student’s most recent Initial or periodic Re-Evaluation accurately reflect the impact of the student’s physical or mental impairments, including impairments that are episodic or in remission, on the student’s ability to access and participate in the school’s programs and activities? If yes, and the student has a Section 504 accommodation plan in place, the student will continue to receive a Section 504 accommodation plan. If the answer is no, the Committee should conduct a full Re-Evaluation using WCSB Section 504 Initial Evaluation and Periodic Re-Evaluation.</p>	Appropriateness of Short Form Question 4C		
	Yes		No

If all three answers to the screening questions 4a-4c are Yes, and the procedural steps are complete, proceed to evaluate using this form. Should any answer to the Questions 4a-4c be “No,” Form XV should be used instead of this form.

Evaluation Data Considered from a Variety of Sources
 The Committee reviewed and carefully considered the following data gathered from a variety of sources. [Please check each that applies, or attach copies of the data.]

Parent input	Student work portfolio	
Grade reports	Special education records (specify)	
Standardized Tests and Other Tests	Disciplinary records/referrals	
Early Intervention data	Mitigating measures	
Teacher/Administrator Input	Other	
School Health Information	Other	
Medical evaluations/diagnoses	Other	

NOTE: 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.)

Changes since the last full evaluation:
 Please describe any changes in the student’s impairments or changes in the student’s disability-related needs since the last full evaluation: _____

Section 504 Committee Action (select the appropriate action by checkmark)

No changes to 504 Plan. No changes to the current Section 504 accommodation plan are necessary at this time. The student’s existing Section 504 accommodation plan will remain in place as written, subject to future Annual Reviews, periodic Re-Evaluations, or other reviews, should changes in the student’s impairments or need for services so require.	<input type="checkbox"/>
Changes to 504 Plan. Changes to the Section 504 accommodation plan are necessary. The Section 504 Committee will proceed to make appropriate changes to the accommodation plan.	<input type="checkbox"/>
No 504 Plan (In Remission). The student remains eligible under Section 504, but will not require a Section 504 accommodation plan because the physical or mental impairment is in remission, and there is no current need for services. The student will receive manifestation determination, procedural safeguards, periodic Re-Evaluation or more often as needed, as well as the nondiscrimination protections of Section 504. Should need for a Plan develop, the Section 504 Committee shall reconvene and develop an appropriate Section 504 accommodation plan.	<input type="checkbox"/>
No 504 Plan (Mitigating Measures). The student is eligible under Section 504, but will not require a Section 504 accommodation plan because the student’s needs are met as adequately as his nondisabled peers due to the positive effect of mitigating measures currently in use. The student will receive manifestation determination, procedural safeguards, periodic Re-Evaluation or more often as needed, as well as the nondiscrimination protections of Section 504. Should need for a Plan develop, the Section 504 Committee shall reconvene and develop an appropriate Section 504 accommodation plan.	<input type="checkbox"/>

Wakulla County School Board
Section 504 Manifestation Determination Evaluation

Procedural Checklist:					
Both boxes must be checked before the §504 evaluation for manifestation determination can occur.					
Verify how the parent was informed of the date, time, and place for this evaluation					
	in writing		by phone		in person
					Other?
Verify that the §504 Committee is a group, including a person with knowledge in each of the required areas. (See below)					

Student:	Student ID #:
School/District:	Date of Evaluation:

§504 Committee Membership:		
By regulation, the Section 504 Committee is a group of knowledgeable people. Within the group, each required type of knowledge must be present. List each member attending and check the area of knowledge each provides (attach an additional sheet if necessary). Each required area of knowledge must be present on the committee.		
Name	Position/Title	Knowledge of ...
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options

Evaluation Data Considered from a Variety of Sources	
The Committee reviewed and carefully considered data gathered from a variety of sources, including the Referral Document. [Please check each type of data reviewed by the Committee, or attach copies of the data.]	
<input type="checkbox"/> Parent input	<input type="checkbox"/> Student work portfolio
<input type="checkbox"/> Grade reports	<input type="checkbox"/> Special education records (specify)
<input type="checkbox"/> Standardized Tests and Other Tests	<input type="checkbox"/> Disciplinary records/referrals
<input type="checkbox"/> Early Intervention data	<input type="checkbox"/> Medical evaluations/diagnoses
<input type="checkbox"/> Teacher/Administrator Input	<input type="checkbox"/> Witness statements
<input type="checkbox"/> School Health Information	<input type="checkbox"/> Other
NOTE: 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.)	

Behavior subject to disciplinary action (The 504 Committee does not address whether or not the alleged behavior occurred):			
List each of the student’s Section 504 qualifying physical or mental impairments:			
The Section 504 Committee reviewed and discussed the data listed above. Based on this review, the Committee has made the following determinations:			
Question #1: Was the conduct in question caused by, or directly and substantially related to the student’s disabilities?		Yes	No
Question #2: Was the conduct in question the direct result of the school’s failure to implement the student’s Section 504 plan, if there was any such failure?		Yes	No
Results: If either of the questions are answered “yes,” the behavior must be considered to be a manifestation of the student’s disability. In that event, the student cannot be expelled or placed in the school’s disciplinary alternative education setting for more than 10 school days.			

Committee Notes:

**Wakulla County School Board
Notice of Section 504 Manifestation Determination Evaluation Results**

Date

Dear Parent/Guardian/Adult Student,

This letter is to inform you that the Section 504 Committee had a meeting on _____ to discuss your student _____ (student's name). A copy of the manifestation determination evaluation form is attached. After careful review of relevant evaluation data indicated on page 1, the Section 504 Committee analyzed the data to answer the manifestation determination questions on page 2. While the evaluation document provides more detail on the Committee's decision, by way of summary, the Committee determined that _____ (provide brief summary of decision)

A copy of the 504 Committee's manifestation determination evaluation is enclosed. If your student's Section 504 plan was changed during the meeting, a copy of the new §504 Plan is also attached.

If you have any questions concerning this decision, please call me at _____.

I will be more than happy to discuss any questions that you may have.

Sincerely,

Section 504 Coordinator

- Encl. (1) Completed Manifestation Determination Evaluation Form
(2) §504 accommodation plan (if the student had a Plan and if the Plan was changed)

Wakulla County School District

**STUDENT REQUEST TO BRING A SERVICE ANIMAL TO SCHOOL
OR A SCHOOL FUNCTION**

Date _____ (request made a reasonable period of time prior to the animal's presence at school or at a school function/event)

Student name _____

Parent name(s) _____

School _____

Unless it is readily apparent or has already been observed by school system personnel, describe the work or task(s) that the service animal performs that is/are directly related to the student's disability:

Type of service animal: Dog Other: _____

Name of service animal: _____

Name of service animal's handler: _____

Documentation attached that the Service Animal is:

- Properly and currently immunized, licensed and registered as required by state and local law

Other relevant information the School System should know:

Please submit completed Request to the school principal. A meeting of the student's 504/IEP Team will be scheduled to address the request.

Note: This Registration/Agreement is valid until the end of the current school year. It must be renewed prior to the start of each subsequent school year or when a different service animal will be used.

Guidance for IEP/504 Team Service Animal Decisions

This guidance is provided to assist IEP/504 Teams in addressing whether or not a student's request to bring his/her service animal to school or to a school function/event will be honored or whether a student will be asked to remove a service animal that is already at school with the student. The following questions and factors should be considered when making this case-by-case (and interactive) consideration:

1. Is the animal a "service animal" that meets certain qualifications?
 - Does the animal meet the definition of "service animal" under state law and the ADA Title II regulations and as defined in the School System's procedures?
 - Does the service animal perform work or a task for the student that is directly related to the student's recognized disability?
 - Is the animal under the handler's control (if the student is the handler, can the student handle the animal with some assistance from the school)?
 - Is the service animal housebroken?
 - Has the parent/adult student provided all required and current paperwork regarding immunizations, registration and licensing as required by state and local law?
2. The potential risk or threat to health or safety of others
 - Does the animal pose an unacceptable risk or threat to the health or safety of others based upon the best available objective evidence? Factors in answering include:
 - the nature, duration and severity of the risk;
 - the probability that the potential injury will actually occur; and
 - whether reasonable modifications of policies, practices or procedures will mitigate the risk to an acceptable level.
3. Fundamental alteration/undue burden to the nature of the School System's program/activity
 - Will the presence of the animal fundamentally alter the nature of the School System's program or activity or impose an undue burden on the School System?
4. Documenting the Decision on the IEP/504 Plan

In general, the animal itself **IS NOT** part of the IEP/504 Plan as a related service or accommodation for FAPE, unless there is the rare instance where the Team determines that a service animal is *necessary for the student to benefit from special education services or to receive a free appropriate public education*. Rather, the Team is to decide, using the questions above and all relevant information, whether it is appropriate to allow the student to bring his/her service animal to school or to a school function, and it should be documented that **the accommodation being provided is allowing the student to bring his/her service animal to school NOT the provision of the actual service animal itself**. It is suggested that the IEP or 504 Plan include a statement such as the

following: “Based upon the Wakulla County School District’s procedures, the team has determined that it is appropriate to allow _____ to bring his/her service animal to school.”

Other accommodations should be documented on the IEP or 504 Plan by the team, as appropriate, including things such as when and where the student’s animal will be allowed (including the school bus); where and when the animal will need water, bathroom breaks, snacks, etc.; whether a school nurse or other school personnel need to be involved regarding health issues, staff/student sensitivity training, preparation and planning for the animal’s presence, etc.; and when/where the dog will remain on a leash/tether.

5. Decision that Student will not be Allowed to Bring his/her Service Animal to School

Any determination that a student will *not* be allowed to bring his/her service animal to school is a grievable issue and subject to the School System’s internal grievance procedures regarding claims of disability discrimination. Parents also may be entitled to initiate a due process hearing under the IDEA or Section 504 if they claim that the refusal of the request is a “denial of FAPE” to the student. Parents may also file a Complaint with the Office for Civil Rights (OCR).