

AUGUSTA SCHOOL DEPARTMENT

AUGUSTA, MAINE

SECTION 504 OF THE REHABILITATION ACT OF 1973

Approved by the Augusta Board of Education

2/8/17

AUGUSTA SCHOOL DEPARTMENT

AUGUSTA, MAINE

SECTION 504 OF THE REHABILITATION ACT OF 1973

Section 504 is an act which prohibits discrimination against persons with a handicap in any program receiving federal financial assistance. The act defines a person with a handicap as anyone who:

1. Has a mental or physical impairment which substantially limits one or more major life activities (major life activities include activities such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working);
2. Has a record of such an impairment; or
3. Is regarded as having such impairment.

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

This school district has specific responsibilities under the act, which include the responsibility to identify, evaluate and, if the child is determined to be eligible under Section 504, to afford access to appropriate educational services.

If the parent or guardian disagrees with the determination made by the professional staff of the school district, he/she has the right to appeal the decision.

The Family Educational Rights and Privacy Act (FERPA) also specify rights related to educational records. This act gives the parent or guardian the right to: 1) inspect and review his/her child's educational records; 2) make copies of these records; 3) receive a list of all individuals having access to those records; 4) ask for an explanation of any item in the records; 5) ask for an amendment to any report on the grounds that it is inaccurate, misleading, or violates the child's rights; and 6) a hearing on the issue if the school refuses to make the amendment.

If there are questions, please feel free to contact the building principal or the District 504 Coordinator.

AUGUSTA SCHOOL DEPARTMENT

AUGUSTA, MAINE

SECTION 504 OF THE REHABILITATION ACT OF 1973

SECTION 504 PROCEDURES FOR IDENTIFICATION, INTERVENTION, AND IMPLEMENTATION

The Section 504 process begins when any school staff member or, parent/guardian, or other knowledgeable and interested professional submits a request to the building principal that a child be evaluated to determine if he/she qualified for assistance under Section 504 because the student:

1. Has a physical or mental impairment, which substantially limits one or more of the student's major life activities (including learning);
2. Has a record of such impairment or is regarded as having such impairment.

Within 7 days of receiving a referral for Section 504, the building coordinator and the building principal or counselor must form a Section 504 Team and set a date for a meeting. The team will be comprised of the building 504 coordinator, building principal, parent/guardian, counselor, and teacher.

Team members will be notified of the meeting date and time and will be asked to bring any data concerning the student that could help the committee make a decision about the eligibility of the student under Section 504. This information may include but not be limited to classroom performance data, achievement test data, any results from psychological testing, etc. The building principal or building coordinator will make sure that current vision and hearing screening results are available for the committee to review.

If the team decides an evaluation is warranted, the building principal/504 coordinator will see that an evaluation of the student is conducted accurately and completely assesses the nature and extent of the handicap.

If an evaluation is necessary, but the nature of the suspected handicap is medical, then parents are responsible for the evaluation. If an evaluation is necessary and the nature of a suspected handicap is not medical, then a referral to special education should be made and consent to conduct an evaluation should be obtained from parent, if they are in agreement.

If an evaluation is warranted and consent to conduct a special education evaluation is obtained, then an evaluation will be scheduled and subsequently an Individual Education Program (IEP) will convene to review the new results. If the student is not eligible for special education services, then the IEP will adjourn and a Section 504 meeting will convene to review the results, determine eligibility under Section 504 and develop an accommodation plan, if necessary.

If the committee determines that the student is not eligible under Section 504, the parents will be provided with a copy of this decision and a copy of Parent/Student Rights in Identification, Evaluation and Placement and a copy of the District 504 Grievance Procedures.

If the committee decides that the student is eligible under Section 504, a Section 504 Accommodation Plan for the delivery of all needed services will be written and the parents will be provided with a copy of this plan, a copy of Parent/Student Rights in Identification, Evaluation and Placement, and a copy of District 504 Grievance Procedures. If at some point in time the team finds that a student no longer qualifies for services under Section 504, the parents will be given a copy of the decision along with Parent/Student Rights in Identification, Evaluation and Placement, and a copy of District 504 Grievance Procedures.

For the purpose of reporting summative data, the building principal or the 504 building designee will keep a record of the students being served under Section 504. This data will indicate the name, grade level, disabling condition and briefly describe modifications made to ensure equal educational opportunity.

This information will be sent on a quarterly schedule to the District Section 504 Coordinator at the Office of the Superintendent so that a consolidated district report can be filed. The data for this report should be sent to the District Section 504 coordinator no later than November 30th, January 31st, April 30th and May 31st of each school year.

AUGUSTA SCHOOL DEPARTMENT

AUGUSTA, MAINE

SECTION 504 OF THE REHABILITATION ACT OF 1973

**PARENT/STUDENT RIGHTS IN IDENTIFICATION, EVALUATION AND
PLACEMENT (SECTION 504 OF THE REHABILITATION ACT OF 1973)**

THE FOLLOWING IS A DESCRIPTION OF THE RIGHTS GRANTED BY FEDERAL LAW TO STUDENTS WITH HANDICAPS. THE INTENT OF THE LAW IS TO KEEP YOU FULLY INFORMED CONCERNING DECISIONS ABOUT YOUR CHILD AND TO INFORM YOU OF YOUR RIGHTS IF YOU DISAGREE WITH ANY OF THESE DECISIONS.

YOU HAVE THE RIGHT TO:

Have your child take part in, and receive benefits from, public education programs without discrimination because of his/her handicapping condition;

1. Have a school district advise you of your rights under federal law;
2. Receive notice with respect of identification, evaluation or placement of your child;
3. Have your child receive free appropriate public education. This includes the right to be educated with non-handicapped students to the maximum extent appropriate. It also includes the right to have the school district make reasonable accommodations to allow your child an equal opportunity to participate in school and school-related activities;
4. Have your child educated in facilities and receive services comparable to those provided non-handicapped students;
5. Have evaluation, educational, and placement decisions made based upon a variety of information sources, and by persons who know the student, the evaluation data, placement data and placement options;
6. Examine all relevant records relating to decisions regarding your child's identification, evaluation, educational program and placement;
7. Obtain copies of educational records at a reasonable cost;
8. Request mediation or an impartial due process hearing related to decisions or actions regarding your child's identification, evaluation, educational program or placement. You and the student may take part in the hearing and have an attorney to represent you. Hearing requests must be made to the Superintendent of Schools and the District's 504 Coordinator;

9. Ask for payment of reasonable attorney fees if you are successful on your claims;
10. File a local grievance in writing to the superintendent.

AUGUSTA SCHOOL DEPARTMENT

AUGUSTA, MAINE

SECTION 504 OF THE REHABILITATION ACT OF 1973

SECTION 504 GRIEVANCE PROCEDURES

It is the policy of the Augusta Public Schools Board of Education to provide a free and appropriate public education (FAPE) to all students within its jurisdiction who are handicapped consistent with the definitions set forth in Section 504 of the Rehabilitation Act of 1973 and of the Americans with disabilities Act (ADA) of 1990. No student solely by reason of his or her handicap as defined in these Acts, shall be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity operated by the school district.

504 Grievance Procedures

A parent or guardian who believes that the district is violating Section 504 procedures may file a grievance with the district.

A parent or guardian who believes that they, or their child, have not received proper services or accommodations which are therefore a violation of Section 504, should file the complaint with the Superintendent of Schools and District 504 Coordinator.

The complaint should be in writing and explain why the complainant believes there is a violation of the law. Upon receiving the complaint, the 504 coordinator will schedule an informal hearing within fifteen (15) working days. The parent/guardian has the right to be accompanied by counsel.

At the informal meeting, the purpose is to clarify each party's concerns and understandings of the specific alleged violation. At the informal meeting the parties will attempt to resolve the complaint. A description of the alleged violation will be reduced to writing.

If it is determined that a satisfactory conclusion cannot be reached a meeting will be scheduled within five (5) working days with the superintendent or assistant superintendent of schools.

If after meeting with the superintendent or assistant superintendent of schools, the complainant believes that the violation remains unresolved, the complainant or the school may request mediation or a hearing.

The costs for mediation and or the hearing are borne by the local school department. You and the student may take part in the hearing and have an attorney represent you.

1. Hearing request must be made to the Superintendent of Schools. The following details the procedure:

- a) If the parent/guardian disagrees with the identification, evaluation, educational placement, or the provisions of a free appropriate public education for his or her child then the parent/ guardian may make a written request for a hearing to the Superintendent of Schools, indicating the specific reason(s) for the request. A copy of the request may be filed with the nearest Regional Office for Civil Rights.
- b) The local school district may initiate a hearing regarding the identification, evaluation or educational placement of the student or the provision of a free appropriate public education to the student. The local school district shall notify the parent of the specific reason(s) for the request.
- c) Such hearings shall be conducted within twenty (20) instructional days after the request unless the hearing officer grants an extension, and at a time and place reasonably convenient to the parent. Upon receipt of the parent's or local school district's request for a hearing the local Superintendent or designee shall designate the independent hearing officer. The local school district shall bear all costs pertaining to the hearing, including the transcription, hearing officer's fee, and expenses; but shall not be responsible for the fees and expenses incurred by the parent/guardian except for those detailed below. The parent involved in a hearing shall be given the right to have the child who is the subject of the hearing present and or open the hearing to the public, and be represented by legal counsel or other representative.
- d) During the pendency of the hearing, unless the local school district and the parents of the child agree otherwise, the child involved in the proceeding shall remain in his or her present educational placement. If there is a dispute regarding this present placement, the hearing officer shall order an interim placement. The present educational placement of the child shall include normal grade advancement if the proceedings extend beyond the end of a school year. If the issue involves an application for initial admission to school, the child, with the consent of the parent, shall be placed in the school until the completion of the proceedings. In the absence of an agreement, the hearing officer shall determine the child's placement during the proceedings.
- e) The child and the parent shall have the right to legal counsel and or other representation of their own choosing. The local school district may inform the parent of any free or low cost legal services available in the area if the parent requests the information or if the local school district initiates a hearing. The decision of the hearing officer shall be based solely upon the evidence presented at hearing. The school shall bear the burden of proof as to the appropriateness of any placement, transfer or denial of same.

- f) A tape recording or other verbatim record of the hearing shall be made and transcribed and upon request shall be made available to the parent or the parent's representative at local school district's expense. At a reasonable time prior to the hearing, during school hours, the parent or the parent's representative shall be given access to all records of the local school district and any of its agents or employees pertaining to the child, including all test and reports upon which the proposed action may be based. The parent or parent's representative shall have the right to compel the attendance, to confront, or to cross examine any witness who may have evidence upon which the proposed action may be based. The parent or parent's representative and local school district shall have the right to present evidence and testimony, including expert medical, psychological or educational testimony. Introduction of any evidence at the hearing that has not been disclosed to both parties at least (5) days before the hearing is prohibited, subject to the discretion of the hearing officer.

 - g) Within fifteen (15) instructional days after the hearing, the hearing officer shall render a decision in writing. Such decision shall include findings of fact, conclusions of law, and order, if necessary, which will be binding on all parties. The dated decision shall be sent by mail to the parent and the Superintendent of the school and shall contain notice of the right to review the discussion. The decision shall be implemented no later than twenty (20) instructional days following the date of the decision, unless review is sought by either party. Should the parent/guardian be represented by legal counsel and ultimately prevail on the issues at the hearing, the parent/guardian may be entitled to payment of all or part of the attorney fees and the cost incurred by the parent/guardian.
2. Request a review (appeal) of the hearing should you not prevail. The following details the procedure:
- a) A petition to review (appeal) the decision of a hearing officer may be made by any party to the hearing. The request must be in writing, filed with the local Superintendent and the opposing party, be specific to the objections, and be filed within twenty (20) instructional days of the date the hearing officer's decision is received. The school corporation is responsible for hiring an independent Review (Appeals) Officer to conduct an impartial review of the record as a whole and may, at its election, conduct its review with or without oral argument. Such review shall be conducted within twenty (20) instructional days of the receipt of the Petition for Review, unless either party requests an extension of time or the Board on its own motion extends the timelines.
 - b) The Review (Appeals) Officer shall insure the transcription is prepared of its review and made available upon request of any party.
 - c) Any party disagreeing with the decision of the Review (Appeals) Officer may appeal to the Regional Office for Civil Rights.

3. File a local grievance to resolve complaints of discrimination. The procedure is as follows:

- a) An alleged grievance under Section 504 must be filed in writing fully setting out the circumstances giving rise to such grievance.
- b) Such claims must be made in writing and filed with the following individual:

Section 504 Coordinator
Augusta School Department
Office of the Superintendent
40 Pierce Drive Suite 3
Augusta, Maine 04330

- c) A hearing will be conducted according to the procedures outlined in the regulations implementing the Family Educational Rights and Privacy Act (FERPA).
- d) The Section 504 Coordinator will appoint a hearing officer who will conduct the hearing within a reasonable time after the request was received.
- e) The Section 504 Coordinator shall give the parent, student, or employee reasonable advance notice of the date, time, and place of hearing.
- f) The hearing may be conducted by any individual, including an official of the local school district, who does not have a direct interest in the outcome of the hearing.
- g) The local school district shall give the parent, student, or employee full and fair opportunity to present evidence relevant to the issues raised. The parent, student or employee may, at their own expense, be assisted or represented by individuals of his or her choice, including an attorney.

- h) The local school district shall make its decision in writing within fifteen (15) days after the hearing.

- i) The decision must be based solely on the evidence presented at the hearing and shall include a summary of the evidence and reasons for the decision. The persons in this district who is responsible for assuring that the district complies with Section 504 and the Americans with Disabilities Act (ADA) is the Section 504 Coordinator.

**AUGUSTA SCHOOL DEPARTMENT
AUGUSTA, MAINE**

NOTICE OF SECTION 504 MEETING

Date: _____

Dear Parents:

This is an invitation and confirmation of a scheduled Section 504 meeting on your child, _____ . The Parent/Student Rights in Identification, Evaluation and Placement document and a copy of District 504 Grievance Procedures are enclosed in this envelope.

This meeting was mutually agreed upon by the school and parents to be held:

Student: _____ Date: _____

Location: _____ Time: _____

A. The purpose of this meeting:

- | | |
|---|--|
| <input type="checkbox"/> Discuss need for an evaluation | <input type="checkbox"/> Discuss Evaluation Results |
| <input type="checkbox"/> Discuss Identification | <input type="checkbox"/> (15) Day Program Review |
| <input type="checkbox"/> Discuss Annual Review | <input type="checkbox"/> Discuss Misconduct/infraction as it relates to disability |

B. The following people may be included in the meeting:

1. School Principal _____
2. Guidance Counselor _____
3. Evaluation Specialist(s) _____
4. Other Specialist(s) _____
5. General Education Teacher(s) _____
6. School Nurse _____

	Medical Evaluation		Other (please specify)

1. Please specify the suspected physical or mental impairment: _____

2. Please checkmark the major life activity that is suspected to be substantially limited.

	Seeing		Hearing		Self-Care		Breathing
	Walking		Learning		Manual Tasks		Working

The term “substantially limits” means that the student is **unable** to perform a major life activity that an average student of approximately the same age can perform. Or the student is significantly restricted as to the condition, manner or duration under which a particular life activity is performed as compared to the average student of approximately the same age. The **impairment must be substantial and somewhat unique** when compared to the average student of approximately the same age.

3. After considering the data, please describe the specific substantial limitation that the student is unable or significantly restricted to perform on the lines below. Consider those and then place an X on the scale provided below regarding the specific degree of substantial limitation in a major life activity (line 2) the impairment (line 1) has caused.

3a. Discussion

3b. Determination

Negligible	Mild	Moderate	Substantial	Extreme
1	2	3	4	5

If the degree of limitation is determined to be less than 4, then the student is not eligible for the anti-discrimination protections under Section 504 of the Americans with Disabilities Act. If another copy of the Parent/Student Rights in Identification, Evaluation and Placement document and District 504 Grievance Procedures are needed again, please provide parents with another copy.

If the limitation is determined to be 4 or more, then the student is eligible for the anti-discrimination protections of Section 504. Please develop an accommodation plan that is reasonably calculated to provide the student with educational benefit, but not to a degree that fundamentally alters the class and provides the student with unfair advantage over other students.

**AUGUSTA SCHOOL DEPARTMENT
AUGUSTA, MAINE**

**NOTICE OF SECTION 504 PLACEMENT
ACCOMMODATION PLAN**

**Student:
Date of Birth:
School:
Grade:
Counselor:**

**Date Program Begins:
Date Program Ends:
Meeting Date:
Annual Review Date:
Building Administrator:**

Parent/Guardian Name/Address:

Participants:

Brief description of disability:

Service(s) to be provided:

Staff positions responsible:

Frequency of each service required:

Describe any classroom, playground, and/or transportation accommodations that are needed:

Annual goals:

AUGUSTA SCHOOL DEPARTMENT

AUGUSTA, MAINE

SECTION 504 IDENTIFICATION, EVALUATION AND PLACEMENT DATA

QUARTERLY ACTIVITY

2016-2017 SCHOOL YEAR

For the purpose of reporting summative data, the building principal or the 504 building designee will keep a record of the students being served under Section 504. This data will indicate the name, grade level, disabling condition and briefly describe modifications made to ensure equal educational opportunity. This information will be sent on a quarterly schedule to the District Section 504 Coordinator at the Office of the Superintendent so that a consolidated district report can be filed. The data for this report should be sent to the District Section 504 coordinator *no later than November 30th, January 31st, April 30th and May 31st* of each school year.

Date	Activity Code (I), (E), or (P)	Student	Grade	Condition	Accommodations

Principal's Signature _____ Please Circle Quarter *November 30th, January 31st, April 30th and May 31st*

AUGUSTA SCHOOL DEPARTMENT SECTION 504 REFERRAL FORM

Student:	DOB:
School:	Grade:
Teacher:	

Briefly describe the areas of concern for this student:

Briefly describe any attempts that have been tried to address these concerns:

List positive qualities and areas of strength of this student:

Please list and attach any supporting documentation or information (testing, reports, etc.):

Suspected Disability:

Person Completing Form/Title:

Date:

Building 504 Coordinator:

Date Received:

AUGUSTA SCHOOL DEPARTMENT ADVANCE WRITTEN NOTICE OF 504 TEAM MEETING

Student Name:	Date of Birth:
School:	Grade:
Parent/Guardian:	School Contact Person/Position:

Date:

Dear

A 504 Team meeting has been scheduled for your child on:

Date:	Time:	Place:
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The purpose(s) of the meeting is:

- Initial Referral/Eligibility
- Annual Review
- Evaluation/Reevaluation
- Parent Request
- Transfer Student
- Other

As the parent(s)/guardian of a child or as an adult student who has or may have a disability, you are encouraged to participate in the 504 Team meeting. Additional participants who have knowledge or special expertise regarding the child may be invited at the discretion of the parents or district. Members and participants invited to attend the 504 Team meeting may include the following:

Name:	Title:

If you have questions or cannot attend at the scheduled time, please call _____ at _____

(A copy of the Notice of Parent/Student Rights will be provided upon request)

**AUGUSTA SCHOOL DEPARTMENT
SECTION 504
CONSENT TO CONDUCT EVALUATION(S)**

Student Name:	Date of Birth:
School:	Grade:
Parent/Guardian:	School Contact Person/Position:

The following is a description of the methods to be used to evaluate your child. You will be notified and given the opportunity to review and obtain copies of evaluation summaries or other reports to be discussed at a 504 Team meeting.

At the Team meeting, we will explain the results of the evaluation and discuss its significance to your child's educational program. If you have any questions about these procedures, please call _____ at _____.

Assessments are designed to collect information on health, fine and gross motor skills, social or developmental history, behavior and academic functioning. The following evaluations are recommended for your child:

I understand the nature of, and the reasons for, the evaluations identified above. I further understand that my consent is voluntary and may be revoked at any time. I also understand that I will be provided with a written copy of the evaluation reports and they will be communicated to me at a 504 Team Meeting.

- YES, I give my consent for the above noted evaluation(s).
- NO, I DO NOT give my consent for the above noted evaluation(s).

Parent/Guardian Signature

Date

Printed Name:

Please return form to:

AUGUSTA SCHOOL DEPARTMENT
NOTICE OF PARENT/STUDENT RIGHTS

Section 504 of the Rehabilitation Act of 1973

The following is a description of the rights granted by the Rehabilitation Act (Section 504) to parents and their children who are identified as disabled. The school district is obligated to inform you of decisions about your child and of your rights if you disagree with any of these decisions.

You have the right to:

1. Have your child take part in, and receive benefits from public education programs without discrimination because of his/her disability;
2. Have the school district advise you of your rights under federal law;
3. Receive notice from the school with respect to the identification, evaluation, educational program or placement of your child;
4. Have your child receive a free appropriate public education. This includes the right to be educated with non-disabled students to the maximum extent appropriate. It also includes the right to have your child receive any related aids and services necessary for your child to benefit from his or her educational program.
5. Have your child educated in comparable facilities and receive comparable services to those provided non-disabled students;
6. Have decisions regarding your child's evaluation, program and placement based upon a variety of information sources, and made by persons familiar with the student, the evaluation data, and placement options;
7. Have periodic re-evaluations of your child, including before any significant changes are made to your child's educational program or placement;
8. Have your child receive an equal opportunity to participate in extra-curricular school activities;
9. Examine all relevant educational records relating to decisions regarding your child's identification, evaluation, education program, and placement;
10. Obtain copies of educational records at a reasonable cost unless the fee would effectively deny you access to the records;

11. Receive a response from the school district to reasonable requests for explanations and interpretations of your child's records;
12. Request amendment of your child's educational records if there is reasonable cause to believe that they are inaccurate, misleading or otherwise in violation of the privacy rights of your child. If the school district refuses this request for amendment, it shall notify you within a reasonable time, and advise you of the right to a hearing;
13. File a grievance through local grievance procedures regarding any alleged violation of the Rehabilitation Act;
14. Request an impartial hearing on decisions or actions regarding your child's identification, evaluation, educational program or placement. You have the right to participate in the hearing and be represented by an attorney;
15. Have the decisions made by hearing officers or others reviewed in state or federal court;

The person in this District who is responsible for assuring that the District complies with Section 504 is:

**Lynne Adams
40 Pierce Drive Suite 3
Augusta, Maine 04330
626-2464**

AUGUSTA SCHOOL DEPARTMENT 504 Accommodation Plan

Student Name:	Date of Birth:
School:	Grade:
Parent/Guardian:	School Contact Person/Position:
Meeting Date:	Annual Review Date:
Disability:	

A. Team Members

Name/Position: **Knowledgeable about:**

	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options

B. Accommodations

Note: After eligibility has been determined, the team should consider the student's current functional limitations with consideration of the use of mitigating measures in developing the 504 Plan. All accommodations should be directly linked to the student's disability and should be measures that are unique to and necessary for the student.

The team believes that the following accommodations are necessary for the student to access and benefit from his or her educational program:

1. The school will: *(state action and person responsible)*

2. The parent(s) will:

3. The student will:

4. Participation in assessments:

No accommodations With accommodations

Specify accommodations:

AUGUSTA SCHOOL DEPARTMENT

Section 504 Eligibility Determination Form

Student Name:	Date of Birth:
School:	Grade:
504 Contact:	Meeting Date:

A. The purpose of the meeting:

- Determine initial eligibility under Section 504 and consider eligibility for accommodations.
- Review eligibility under Section 504.
- Review eligibility and accommodations before significant change in placement. [*Complete sections **A, B, D, F and G** only.*]

B. 504 Team members present:

Name/Position: Knowledgeable about:

		Child	Meaning of Evaluation Data	Accommodations/Placement Options
		Child	Meaning of Evaluation Data	Accommodations/Placement Options
		Child	Meaning of Evaluation Data	Accommodations/Placement Options
		Child	Meaning of Evaluation Data	Accommodations/Placement Options
		Child	Meaning of Evaluation Data	Accommodations/Placement Options

C. Review student's current academic status and educational performance. Include and attach referral information if this is an initial referral. (*Describe nature of concern*):

D. Eligibility Determination:

Individuals considered eligible for protection from discrimination under Section 504 are those who have a physical or mental impairment which substantially limits a major life activity. To make the determination of "disability" under Section 504, both conditions must be present.

1. What source of information is available to make this determination? Check all that apply (*Include relevant dates and names of evaluators, where appropriate.*)

- | | |
|---|--|
| <input type="checkbox"/> School records review (dated) | <input type="checkbox"/> Observations of student (dated) |
| <input type="checkbox"/> Grades and report card review (dated) | <input type="checkbox"/> Teacher reports (dated) |
| <input type="checkbox"/> Parent and/or student report (dated) | <input type="checkbox"/> Informal assessments (dated) |
| <input type="checkbox"/> Medical information (dated) | <input type="checkbox"/> Nursing Assessment (dated) |
| <input type="checkbox"/> Standardized testing (dated) | <input type="checkbox"/> Parent/Student Interviews (dated) |
| <input type="checkbox"/> Checklists, behavior rating scales (dated) | |
| <input type="checkbox"/> Other: | |

2. Is information available to make the determination of the presence of a physical or mental impairment that substantially limits a major life activity?

- Yes If "YES", continue to number 3 below.
- No If "NO," Specify the type of additional information that is needed:
 - If the information to be obtained includes testing, obtain parent consent on *Consent for Section 504 Testing*. If it is necessary to communicate with outside providers, obtain a release to communicate with professionals outside of district. Once needed information is gathered, reconvene a 504 meeting and continue the process of determining eligibility.

3. **Does the student have a physical or mental impairment?**

A "physical or mental impairment" means a) 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 and lymphatic, skin, and endocrine or b) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

NO YES

If "**NO**": If no physical or mental impairment exists, the student is not identified as an individual with a disability. Go to "**G**" on page 5 of this form.

If "**YES**": What is the impairment? (as recognized in DSM-IV or other respected source, if not excluded under Section 504/ADA, e.g., illegal drug use)

- Attach all supporting documentation to this form. A statement of "YES" without supporting documentation is insufficient to meet this standard.
- If the team determines that the student is identified as having a physical or mental impairment, continue to the next page to determine whether there is a substantial limitation of a major life activity.

4. **Does the identified impairment substantially limit a major life activity?**

In order to meet this standard, the student **must be unable to perform a major life activity** that the average person in the general population can perform (compared to national norms, not local norms). OR, the student **must be restricted to a substantial degree** as to the condition, manner, or duration under which the major life activity is performed by the average person in the general population (compared to national norms, not local norms).

Use the chart below to determine the presence of a substantial limitation. First, identify the major life activity affected. Second, determine whether the student is unable to perform the major life activity OR whether there is a restriction of condition, manner or duration. Finally, if there is a restriction, determine the severity of the restriction.

- Check the major life activity(ies) that is affected by the impairment(s):

<input type="checkbox"/> seeing	<input type="checkbox"/> hearing	<input type="checkbox"/> caring for oneself	<input type="checkbox"/> breathing
<input type="checkbox"/> walking	<input type="checkbox"/> learning	<input type="checkbox"/> performing manual tasks	<input type="checkbox"/> working
<input type="checkbox"/> eating	<input type="checkbox"/> sleeping	<input type="checkbox"/> standing	<input type="checkbox"/> lifting
<input type="checkbox"/> bending	<input type="checkbox"/> reading	<input type="checkbox"/> concentrating	<input type="checkbox"/> thinking
<input type="checkbox"/> communicating	<input type="checkbox"/> speaking	<input type="checkbox"/> the operation of a major bodily function	

- Rate the severity and impact of the impairment(s) only on those major life activities you have checked above:

NOTE: Severity ratings of 3 and above are considered to be reflective of "substantial" limitation. Consider the nature, severity, duration or expected duration of the impairment, and the permanent or long-term impact resulting from the impairment. Short-term or temporary impairments/illnesses expected to last six months or less do not qualify as disabilities. The ameliorative effects of mitigating measures, such as the use of medications, personal devices such as hearing aids, learned behavioral or adaptive neurological modifications or reasonable accommodations may not be considered at this stage of the analysis, other than the use of eyeglasses or contact lenses. Conditions that are in remission or episodic in nature qualify as disabilities if substantially limiting in their active state.

Place an "X" on the following scale to indicate the specific degree that the impairment(s) (in #3) limits each of the major life activities checked above:

<u>Major Life Activity</u>	<u>Ability to Perform a Major Life Activity</u> <i>Mark "No" if the student is unable to perform this major life activity. No further rating required.</i>	OR	<u>Restriction of Condition, Manner, or Duration of Performing a Major Life Activity</u> <i>To what degree is the student restricted as to the condition, manner, or duration under which the major life activity is performed in comparison to the average person in the general population.</i>	Based on the review: Is there a Substantial Limitation?
Caring for oneself	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Performing Manual Tasks	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Seeing	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Hearing	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Eating	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Sleeping	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Walking	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Standing	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Lifting	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Bending	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Speaking	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Breathing	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild Moderate Substantial Severe <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4	<input type="checkbox"/> No <input type="checkbox"/> Yes

Learning	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Reading	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Concentrating	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Thinking	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Communicating	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Working	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes
Operation of a major bodily function	<input type="checkbox"/> No <input type="checkbox"/> Yes	OR	Mild <input type="checkbox"/> 1	Moderate <input type="checkbox"/> 2	Substantial <input type="checkbox"/> 3	Severe <input type="checkbox"/> 4	<input type="checkbox"/> No <input type="checkbox"/> Yes

The team's determination was less than "3"; the student is not eligible for Section 504 protections. Provide notice to parents of their procedural rights.

OR

The team's determination was a "3" or above. The team should determine and list on the 504 Accommodation Plan, if one is developed, the specific accommodations that are necessary for the student to have an opportunity commensurate with non-disabled students in the district. Some students, although disabled, will require no accommodations.

➤ **Does the physical or mental impairment substantially limit a major Life activity?** No Yes

If the answer to #3 is "no," skip to Section "G". If the answer to #3 is "Yes," continue to Section "E."

E. Necessity of Section 504 Accommodation Plan.

Does the student *require* a Section 504 Accommodation Plan in order to provide the student access to educational programs (e.g. curriculum, facilities, etc.) Please note that mitigating measures (such as the effect of medication, use of hearing aids and other personal devices), should be considered here when considering whether a condition *requires* accommodation in order for the student to access his/her education?

No Yes

If "Yes," the team must develop a Section 504 Accommodation plan.

F. Is this an evaluation before a significant change in placement?

No Yes
[If "No", skip to Section "G"]

1. What is the anticipated significant change of placement?

Graduation Change in program due to disciplinary action Other (specify)

2. Review the student's current progress, credit status, needs & 504 accommodation plan.

3. Consider: does the plan continue to be necessary for the student? No Yes

4. If "Yes," is it appropriate as designed?

No Yes

5. If "No," revise the accommodation plan.

G. Summary of Actions Taken

Parent/Guardian (or student if age 18 or over) was provided written notice of rights under Section 504 at the meeting. If parent/guardian or eligible student did not attend, notice of procedural safeguards and a copy of this form will be mailed.

Insufficient information is available to determine student's eligibility. More evaluative information will be obtained prior to convening another Section 504 Team Meeting.

Student is identified as a person with a disability under Section 504.

A Section 504 Accommodation Plan was developed since student *requires* accommodation(s).

A Section 504 Accommodation Plan is not necessary.

Student is NOT identified as a person with a disability under Section 504.

An evaluation (which may consist of a review of existing records) prior to a significant change in placement has been conducted.

Other (please specify):

Recorder

Title

Received by district administrator:

Date: _____

Signature

AUGUSTA SCHOOL DEPARTMENT
SECTION 504 ELIGIBILITY DETERMINATION FORM [Short Version]

Student Name:	Date of Birth:
School:	Grade:
Parent/Guardian:	School Contact Person/Position:
Meeting Date:	

A. Purpose of Meeting

- Determine initial eligibility under Section 504 and consider eligibility for accommodations/related aids or services.
- Review eligibility under Section 504.
- Review eligibility and accommodations/related aids or services before significant change in placement.

B. 504 Eligibility Team Members: (Check the categories that apply to each team member below)

	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options
	Child	Meaning of Evaluation Data	Accommodations/Placement Options

C. Sources of Evaluation Information:

- | | |
|--|--|
| <input type="checkbox"/> School records review
<input type="checkbox"/> Grades and report card review
<input type="checkbox"/> Parent and/or student report
<input type="checkbox"/> Medical information
<input type="checkbox"/> Standardized testing
<input type="checkbox"/> Other | <input type="checkbox"/> Observations of student
<input type="checkbox"/> Teacher reports
<input type="checkbox"/> Checklists, rating scales
<input type="checkbox"/> Nursing assessment
<input type="checkbox"/> Parents/student interviews |
|--|--|

D. Eligibility Criteria:

1. The student has a mental or physical impairment (specify):

and

2. The impairment substantially limits one or more of the following major life activities (check):

- | | | | |
|-----------------------------------|--|---|--|
| <input type="checkbox"/> seeing | <input type="checkbox"/> hearing | <input type="checkbox"/> caring for oneself | <input type="checkbox"/> breathing |
| <input type="checkbox"/> walking | <input type="checkbox"/> learning | <input type="checkbox"/> working | <input type="checkbox"/> eating |
| <input type="checkbox"/> sleeping | <input type="checkbox"/> standing | <input type="checkbox"/> lifting | <input type="checkbox"/> bending |
| <input type="checkbox"/> reading | <input type="checkbox"/> concentrating | <input type="checkbox"/> thinking | <input type="checkbox"/> communicating |
| <input type="checkbox"/> speaking | <input type="checkbox"/> performing manual tasks | <input type="checkbox"/> operation of a major bodily function | |

The term "substantially limits" means that the student is:

- a) unable to perform a major life activity that the average person in the general population can perform, or
- b) substantially restricted as to the condition, manner or duration under which a particular life activity is performed as compared to the student's average peers (*compared to national norms*).

E. Eligibility Determination:

- The student does not have a physical or mental impairment and/or any identified impairment does not substantially limit a major life activity. Therefore, the student is not eligible for Section 504 protections. The parent must be provided notice of their procedural rights, including the right to an impartial hearing.
- The student does have a physical or mental impairment that substantially limits a major life activity.
 - The student requires accommodations/related aids or services in a 504 plan.
 - The student does not require accommodations/related aids or services in a 504 plan at this time.

AUGUSTA SCHOOL DEPARTMENT
Parental Consent for Initial Section 504 Placement

Student Name:	Date of Birth:
School:	Grade:
Parent/Guardian:	School Contact Person/Position:

Date:

Dear

The 504 Team has found that your child, _____, qualifies as a student with a disability under Section 504. A 504 Plan will be developed to meet his/her individual educational needs annually. You must give your written consent before the District may place your child in the 504 system and implement a 504 Plan. Please indicate below whether or not you consent to the initial placement of your child in Section 504. You can withdraw your consent in writing at any time.

- Yes, I consent to placement of my eligible child in the Section 504 system and Implementation of a 504 Plan.
- No, I do not consent to placement of my eligible child in the Section 504 system or to implementation of a 504 Plan.

Parent Signature

Date

AUGUSTA SCHOOL DEPARTMENT 504 TEAM MEETING MINUTES

Student Name:	Date of Birth:
School:	Grade:
Parent/Guardian:	School Contact Person/Position:
Meeting Date:	Minutes Prepared by:

The purpose(s) of the meeting is:

- Initial Referral/Eligibility
- Annual Review
- Evaluation/Re-evaluation
- Parent Request
- Transfer Student
- Other

Participant:

Title:

Summary of Discussion:

Determinations:

Date

Dear Parent/Guardian,

Our goal is to help each student succeed in school. Some students have health needs that must be addressed during the school day. Many health care services can be provided to students at school, which will keep students at school where they can learn.

We are writing to you because your child has an active health plan that we are following as a result of an on-going medical condition.

Because of certain changes in federal law, it appears that your child is now entitled to certain protections as a child with a disability under Section 504 and under the Americans with Disabilities Act. You are free to choose to have your child's health plan changed to a Section 504 plan. Your choice will not in any way change how we have been serving your child through his or her health plan.

We are not aware of any need to revise or alter your child's health plan at this time, but if you see any need for it to be changed, please contact us and we will set up a 504 eligibility meeting to consider possible changes. You can contact your child's principal at NAME School to receive further clarification or to request a Section 504 meeting.

Sincerely,

NAME
Principal

AUGUSTA SCHOOL DEPARTMENT

Summary of Section 504 Discipline Procedures

- I. School staff may suspend 504-eligible students for up to 10 consecutive school days in the same manner as non-disabled students are suspended.
- II. There is no obligation under Section 504 to provide services when a student's total removals exceed 10 cumulative days in a school year, unless ordered by the 504 Team.
- III. A removal that is a "change of placement" triggers additional duties. A removal is a "change of placement" if:
 - The removal is for more than 10 consecutive days; or
 - There is a series of removals that constitutes a pattern because:
 - The removals total more than 10 school days in school year;
 - The behavior is "substantially similar" to the behavior in previous incidents; and
 - The effect of additional factors such as the length of each removal, their proximity in time and the total length of the removals.
- IV. If a removal is a "change of placement":
 - The 504 Team must meet within 10 school days.
 - The Team must conduct a manifestation determination:
 - If the behavior is a manifestation of the student's disability, the district must return the student to his or her last placement unless the 504 Team decides on a different program and placement in response to the misbehavior, including further removal.
 - If it is not a manifestation, the district may use regular school discipline, with no need to provide services.
- V. Manifestation Determination Standard
 - Was the conduct in question caused by, or did it have a direct and substantial relationship to, the student's disability?
or
 - Was the conduct in question the direct result of the district's failure to implement the student's 504 Plan?
- VI. Drug and Alcohol Offenses
 - If a 504 student whom the school determines is currently using illegal drugs or alcohol violates a school code of conduct, policy or rule related to the use or possession of alcohol or drugs, the district may discipline that student to the same extent it would a non-disabled student. The 504 Team is not required to meet or conduct a Manifestation Determination.

AUGUSTA SCHOOL DEPARTMENT 504 TEAM PROCESS

504 Team Meeting and Decision Making Overview

- A. All decisions regarding a student's 504 eligibility, placement and the provision of any necessary accommodations and/or related aids or services will be made by the 504 Team, and must be based on information from a variety of sources, with information from all sources being carefully considered and documented.
- B. Members of the 504 Team should include the building 504 Coordinator or approved designee, the school nurse when appropriate, and any other appropriate school staff who are knowledgeable about the student, the evaluation data and the placement options. The student's parent/guardian will be invited to participate in the 504 Team meeting and have the opportunity to examine all relevant records. The school and the parent/guardian may invite other individuals with knowledge about the child to the 504 meeting.
- C. A written notice will be given to the parent/guardian prior to the meeting, notifying them of the time, place and purpose of the meeting (see Advance Written Notice of 504 Team Meeting Form). We recommend that the notice be provided at least seven days before the meeting.
- D. The building 504 Coordinator or approved designee will chair the meeting and assign a member of the 504 Team the duty of taking minutes at the meeting (see 504 Team Meeting Minutes Form). A copy of the minutes will be sent to the parent/guardian and placed with the student's education records folder within a reasonable time after the meeting.
- E. Team decisions will be made by consensus. It is not appropriate to make eligibility, placement, or programming decisions based on a majority "vote." In the absence of consensus, the 504 Coordinator or approved designee at the meeting will make the final decision regarding a child's eligibility and, if needed, the placement accommodations and related aids and/or services that the child needs to access school programming.
- F. The school district must provide the parent/guardian with notice of the district's proposals or refusals, or both, regarding their child's educational program, and that the parent/guardian has a right to seek resolution of any disagreements through the local grievance procedure or by initiating an impartial due process hearing. Evaluation and initial placement are subject to the parent/guardian's consent.

I. Referral, Evaluation and Eligibility

- A. A referral to consider Section 504 eligibility may be made by a parent/guardian, eligible adult student or school staff for a student who is believed to need specialized education or related aids and services beyond the accommodations routinely provided for all students. Teachers or other school staff must complete a 504 Referral Form (see 504 Referral Form). A parent/guardian or adult student may, but is not required to, use the Referral Form. All referrals shall be forwarded to the building 504 Coordinator or other designated person.

- B. The building 504 Coordinator or other designated person will gather information that will assist the 504 Team in making a determination regarding the student's eligibility and programming from appropriate sources (e.g., teachers, school nurse, parent, administrators, physician, etc.).
- C. The 504 Coordinator, the 504 Team or the parent may decide to move the referral into the special education referral process, rather than the 504 process, if it appears that the child may be in need of individualized specialized instruction as a result of the suspected disability.
- D. The building 504 Coordinator or other designated person will convene a 504 Team meeting within a reasonable time to consider the concerns raised in the referral and any available information. The Team's discussions and decisions will be summarized in the 504 Team meeting minutes (see 504 Team Minutes) and the parent will be provided a Notice of Parent/Student Rights.
- E. The Team must make decisions about eligibility and significant changes in programming or placement based upon an evaluation of the child's unique needs. If that evaluation is to include specific assessment of the child, the school must obtain written consent from the parent or guardian before conducting any assessment requiring parental consent (see Consent to Conduct Evaluation Form). If a parent refuses to provide consent for an assessment to determine a student's 504 eligibility, the district may, but is not required to, initiate a 504 hearing challenging the parent's decision.
- F. When determining a student's eligibility under Section 504, the Team will complete a 504 Eligibility Form (See short and long Eligibility Form). A copy of the completed Eligibility Form will be sent to the parent/guardian within a reasonable time after the meeting and placed with the student's education records.

II. Programming and Placement

- A. If the Team determines that a student is eligible under Section 504, the Team will complete a 504 Plan for the student (see 504 Plan). If the Team determines that, despite his or her eligibility, the student does not require accommodations and/or related aids or services, the Team will specify this on the Section 504 Plan. If the Team determines that accommodations and/or related aids or services are required at this time, the Team will indicate this on the Section 504 Plan. Written consent from the parent or guardian must be obtained prior to the initial provision of any accommodations and/or related aids services through a Section 504 Plan (see Consent for Initial Placement Form). Written consent is not required before initiating any subsequent changes in the student's 504 program, accommodations, and/or related aids or services.
- B. The 504 Plan will be made available to all staff who work with the student and to the 504 Coordinator. A copy of the 504 Plan will also be provided to the parent/guardian and placed in the student's records within a reasonable time after the 504 meeting. The plan will be reviewed at least annually, or sooner if requested.

III. Re-evaluation

- A. All 504 students must be re-evaluated periodically, but not less than every three years, to determine their continued eligibility and, if eligible, their need for accommodations and/or related aids or services.

Student:

Date of Meeting:

**AUGUSTA SCHOOL DEPARTMENT
SECTION 504
MANIFESTATION DETERMINATION CHECKLIST**

1. The manifestation determination 504 Team meeting should be held within 10 school days of any decision to change the placement of a child with a 504 disability because of a violation of a code of student conduct. A "change of placement" generally means:
 - A. a disciplinary removal from school for more than 10 consecutive school days; or
 - B. a series of removals totaling more than 10 school days in a school year that constitutes a pattern because the behavior is substantially similar to the previous incidents that resulted in removals, and because of additional factors such as length of each removal, the total removal time, and proximity of removals.
2. The manifestation determination must be made by relevant members of student's 504 Team, including the parent, and not simply by school personnel. At the Team meeting, the Team must review all relevant information in the student's file, including the child's 504 Plan, any teacher observations, and any relevant information provided by the parents.
3. The 504 Team will answer the following questions:
 - A. Was the conduct in question caused by, or did it have a direct and substantial relationship to, the child's disability?
 YES NO
 - B. Was the conduct in question the direct result of the local school unit's failure to implement the 504 Plan?
 YES NO

If the answer to either of these two questions is yes, then the behavior in question should be considered a manifestation of the student's disability.
4. If the 504 Team determines that the misconduct is a manifestation of the student's disability, then the Team should determine how to address the student misbehavior, and should consider a possible functional behavior assessment and possible development of a behavior intervention plan for the student. In addition, the Team must decide on the student future placement, and ensure that the student continues to receive a free, appropriate public education.
5. If the Team determines that the misconduct is not a manifestation of the student's disability, then the school may use the regular disciplinary procedures applicable to students without disabilities in the same manner as would be applied to children without disabilities. *The school need not provide educational services to the child if he or she is suspended or expelled for misbehavior that is not a manifestation of the child's disability.*
6. **Special Rule for Drug and Alcohol Violations:**

If a Section 504 student is found 1) to be currently engaging in the illegal use of drugs or alcohol, and 2) to have violated school policies on the use or possession of drugs or alcohol, then the local school unit may take disciplinary action against that student to the same extent and degree as the school unit would undertake for students who are not disabled. The school is not required to have a prior 504 Team meeting, need not determine if the use or possession is related to the student's disability, and need not provide any alternative services during any removal that may be ordered for the use or possession violation, as long as such a consequence is consistent with school policy for nondisabled students. [29 U.S.C § 705(20)(C)(iv)]

**AUGUSTA SCHOOL DEPARTMENT
SECTION 504
COMPLAINT FORM**

Student Name:	School
Parent/Guardian:	Grade:
Address:	Telephone:

1. Please describe your specific complaint about the 504 referral process, eligibility determination or Accommodation Plan, or about the behavior you believe discriminates against your child based on his or her disability. Attach additional pages if necessary. If this complaint is made directly by a student, a copy of the complaint will be provided to the parent/guardian.

2. Please describe how you would like this issue to be resolved.

_____ Date: _____
Signature of Parent/Guardian

_____ Date: _____
Signature of Student, if completed by Student

Please submit this complaint to the Section 504/ADA Coordinator.

_____ Date received: _____
Signature of 504/ADA Coordinator

AUGUSTA SCHOOL DEPARTMENT
SPECIAL EDUCATION AND SECTION 504 CHILDFIND NOTICE

The Augusta School Department has a duty to locate, evaluate and identify any child residing in the District who qualifies for Special Education services or any child attending the public schools who may require Section 504 accommodations or services.

Children eligible for special education include those children with disabilities who have autism, deaf-blindness, emotional disturbance, hearing impairment, multiple disabilities, orthopedic impairment, other health impairment, specific learning disability, speech or language impairment, traumatic brain injury, acquired brain injury, visual impairment, intellectual disabilities, deafness, or developmental delay and who, because of such an impairment, need special education services.

Children eligible for Section 504 accommodations or services include those children who have a physical or mental impairment that substantially limits a major life activity.

If you suspect your child has a disability and may need special education services or 504 accommodations, or if you would like additional information, please contact your child's teacher, or call the District's Special Education Director/504 Coordinator, Lynne Adams, at 626-2464.