

Utility of Form – To provide parents with their rights and request consent to conduct a Section 504 evaluation

SECTION 504 PARENT RIGHTS

School: _____ Date: _____

The intent of this notice is to keep you fully informed concerning decisions about your student and to inform you of your rights if you disagree with any of these decisions.

If your student is identified for Section 504 services, among other things, you have the right to the following actions:

1. Have your student take part in and receive benefits from public education programs without discrimination based on a disability.
2. Receive written notice with respect to identification, evaluation, or placement of your student.
3. Have your student receive a free and appropriate public education. This includes the right to be educated with other students without disabilities to the maximum extent appropriate.
4. Have your student educated in facilities and receive services comparable to those provided students without disabilities.
5. Have evaluation, educational, and placement decisions made based on a variety of information sources and by individuals who know your student, the evaluation data, and placement options.
6. If eligible, have your student receive accommodations under Section 504 of the Rehabilitation Act of 1973.
7. Give your student an equal opportunity to participate in appropriate nonacademic and extracurricular activities offered by the school.
8. Examine all relevant records relating to decisions regarding your student's identification, evaluation, educational program, and placement.
9. Obtain copies of educational records at a reasonable cost if the fee would effectively deny you access to the records.

10. Receive a response from the school to reasonable requests for explanations and interpretations of your student's records.
11. Request amendment of your student'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 student. If the school refuses this request, it shall notify you within a reasonable time and advise you of the right to a hearing.
12. Request mediation or an impartial due process hearing related to decisions regarding your student's identification, evaluation, educational program, or placement. You and your student may take part in the hearing and have an attorney represent you.
13. File a local grievance or complaint.

The person at the school who is responsible for Section 504 compliance is

Section 504 Coordinator

Telephone Number

CONSENT

The school is requesting your consent to conduct the following evaluation procedure:

Evaluation Procedures

Person Responsible

I give written consent to have my child evaluated for possible Section 504 identification.

Parent Signature

Date