**SECTION 504 ELIGIBILITY DETERMINATION WORKSHEET**

Student: Click or tap here to enter text. ID #Click or tap here to enter text.

Date of birth:Click or tap here to enter text. Grade: Click or tap here to enter text.

[ ]  Initial determination [ ]  Review Meeting date: Click or tap here to enter text.

*The 504 team has carefully considered data from the following sources in determining 504 eligibility:*

[ ] Psychological Evaluation

[ ] Physician’s Report [ ] School Health History

[ ] Behavior Observations [ ] Academic Assessments

[ ] Attendance Record [ ] Teacher Recommendations

[ ] Counselor Records [ ] Transcript

[ ] Cumulative File [ ]  Work Samples/Portfolio

[ ] Discipline Records [ ] Grade Reports

[ ] Family interview

[ ] Other:Click or tap here to enter text.

*(504 law requires using data from multiple sources in order to establish eligibility. While not required, please include diagnosis if possible. Attach evidence to this worksheet.)*

**Using above data, the 504 committee answered the following questions to determine eligibility:**

YES/NO

[ ] /[ ]  1) Does the student have a physical or mental impairment? If yes, please describe:

Click or tap here to enter text.

YES/NO 2) Does the physical or mental impairment substantially limit one or more major life activities? If yes, indicate below:

[ ] /[ ]

[ ] seeing [ ]  hearing [ ] breathing [ ] walking [ ] learning

 [ ] performing manual tasks [ ]  speaking [ ] attention [ ] other: Click or tap here to enter text.

YES/NO 3)Does the student need Section 504 services in order for the student’s educational needs to

[ ] /[ ]  be met as adequately as those of non-disabled peers?

**The 504 analysis of eligibility criteria indicates that:**

[ ] *The student is* ***not eligible*** *for services under Section 504 and will continue to receive general education and any available general education resources and programs.*

[ ] *The student* ***is eligible*** *under Section 504 and will receive a 504 Accommodation Plan.*

[ ] *The student* ***remains eligible*** *under Section 504 and will receive and updated 504*

*Accommodation Plan.*

Additional Notes:

**List of 504 Committee Members:**

Names: Signatures:

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| --- | --- | --- | --- | --- | --- |
| Distribution: | [ ] District 504 coordinator | [ ] Parent or guardian | [ ] Section 504 Plan Service Providers | [ ] Site section 504 Coordinator | [ ] Cumulative file |