**504 FORM H**

(School Letterhead)

[INSERT DATE}

Re: Notice of Section 504 Eligibility and Accommodation Plan

Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

At the recent 504 Team Evaluation meeting, your child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ was found to be a qualified student with a disability under Section 504 and to be eligible for various accommodations or services. Items supporting and relevant to this determination include the Section 504 Evaluation Summary Report and the Section 504 Accommodation Plan.

Please sign the plan indicating either your rejection or acceptance. Return one of the signed copies in the enclosed envelope.

Our school staff is confident that the evaluation process and recommended accommodation plan will result in more appropriate educational programming for your child. Feel free to call me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ if you have any questions regarding the plan or other enclosed items. Your assistance throughout this process is very much appreciated.

Respectfully,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Section 504 Building Coordinator

xc: Section 504 District Coordinator