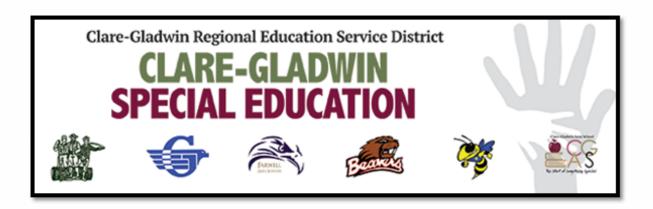
Clare-Gladwin Regional Education Service District



Section 504 Manual for Identifying and Serving Eligible Students:

Policies, Guidelines, and Forms

TABLE OF CONTENTS

INTRODUCTION	1				
OVERVIEW	- 1				
POLICY STATEMENT	2				
DEFINITIONS	2				
CHILD FIND	- 5				
PRE-REFERRAL ASSISTANCE	5				
PARENT RIGHTS	6				
SECTION 504: THE PROCESS	- 6				
A. Referral	- 6				
B. Evaluation	- 8				
C. Eligibility Determination	8				
D. Section 504 Plan	- 8				
E. Review of Section 504 Plan	- 9				
F. Re-evaluation	9				
SUSPENSION AND EXPULSION OF SECTION 504 STUDENTS9					
IMPARTIAL DUE PROCESS HEARING	- 9				
GRIEVANCE PROCEDURE	- 9				

FORMS

FORM A: SECTION 504 CHECKLIST	A-1
FORM B: SECTION 504 REFERRAL FOR EVALUATION	B-1
FORM C: NOTICE OF SECTION 504 PROCEDURAL SAFEGUARDS	C-1, C-2
FORM D: SECTION 504: NOTICE OF REFERRAL AND CONSENT FOR EVALUATION	D-1
FORM E: SECTION 504: PARENT CONSENT FORM	E-1
FORM F: AUTHORIZATION FOR RELEASE AND EXCHANGE OF MEDICAL INFORMATION	F-1
FORM G: COVER LETTER TO PHYSICIAN	- G-1
FORM H: PHYSICIAN'S STATEMENT	H-1
FORM I: SECTION 504: TEACHER INPUT	I-1
FORM J: SECTION 504: MEETING NOTICE AND INVITATION	J-1
FORM K: SECTION 504 PLAN	K-1, K-2, K-3
FORM L: GRIEVANCE PROCEDURE	- L-1, L-2
FORM M: SECTION 504: COMPLAINT FORM	- M-1
FORM N: SECTION 504: MANIFESTATION DETERMINATION MEETING NOTICE AND	
INVITATION	- N-1
FORM O: SECTION 504: MANIFESTATION DETERMINATION REVIEW	O-1, O-2, O-3

INTRODUCTION

Section 504 of the Rehabilitation Act of 1973 (commonly referred to as "Section 504") prohibits discrimination against students on the basis of disability.

This Manual contains information, guidelines, policies, procedures, and forms to achieve compliance with Section 504 with respect to the education of the District's students, in a manner consistent with the District's non-discrimination policies.

The District expects its employees to be knowledgeable about its Section 504 procedures. If you have Section 504 questions concerning either current or prospective, students, please contact the District's Section 504 Coordinator:

504 Coordinator Name
504 Coordinator Title
Clare-Gladwin Regional Education Service District
504 Coordinator Street Address
504 Coordinator City, State, Zip
504 Coordinator Phone

Although Section 504 also applies to employment and facility access by individuals with disabilities, this Manual only addresses student issues under Section 504.

OVERVIEW

Section 504 is a federal law which prohibits discrimination against persons with disabilities. The law provides:

No otherwise qualified individual with a disability...shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance...

29 USC § 794

One of the principal purposes of Section 504 is to ensure that students with disabilities are not denied access to educational facilities, programs, and opportunities on the basis of their disability.

For a student to have a disability which may be protected under this law, he or she must: (1) have a mental or physical impairment, (2) which substantially limits, (3) one or more major life activities. For a student to be considered an "eligible student" under Section 504, all three criteria must be fulfilled.

Under Section 504, schools that receive federal funds may not discriminate against eligible students with disabilities. Section 504 also protects students who have a record of a disability, and students who are regarded as having a disability. Discrimination against students in either category is prohibited under Section 504.

Section 504 requires the District to provide a free appropriate public education ("FAPE") to each eligible students who has a physical or mental impairment which substantially limits a major life activity. Under Section 504, FAPE consists of the provision of regular or special education and related aids and services designed to meet the student's individual educational needs as adequately as the needs of non-disabled students are met and in accordance with Section 504 requirements pertaining to educational

setting, evaluation, placement, and procedural safeguards. The FAPE obligation extends to all students described in this paragraph, regardless of the nature or severity of their disability.

POLICY STATEMENT

The District shall not discriminate against any student having a disability, a record of having had a disability, or who is otherwise regarded as having a disability. The District shall also, as required by law, attempt to locate and identify each student within the District's jurisdiction who may be an eligible student under Section 504. The District shall evaluate each student identified under Section 504 and provide each eligible student with a FAPE as defined by law.

The District also shall not discriminate against persons based upon any other legally-protected characteristic. Other District publications and policy documents should be consulted to obtain details of those prohibitions, and the means by which an internal complaint or grievance concerning any type of discrimination may be filed.

DEFINITIONS

The following definitions apply to this Section 504 Manual, Policies, Guidelines, and Forms.

"Free Appropriate Public Education" ("FAPE")

A "free appropriate public education" is the provision of regular or special education and related aids and services that are designed to meet the individual educational needs of students with a disability as adequately as the needs of non-disabled students are met and is based on evaluation, placement, and procedural safeguards.

"Individual with a Disability"

An "individual with a disability" is a person who:

- 1. Has a physical or mental impairment which substantially limits one or more of such person's major life activities;
- 2. Has a record of such an impairment; or
- 3. Is regarded as having such an impairment.

The Section 504 regulations do not provide an exhaustive list of specific diseases or conditions that may constitute a physical or mental impairment because of the difficulty of developing a comprehensive list of possible diseases and conditions.

"Physical or Mental Impairment"

- 1. Any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive, digestive, genito-urinary; hemic and lymphatic; skin; and endocrine; or
- 2. Any mental or psychological disorder, such as a cognitive impairment, organic brain syndrome, emotional or mental illness, and specific learning disabilities.

"Substantially Limits"

A student who has a physical or mental impairment that substantially limits a major life activity is considered a student with a "disability" under Section 504. This determination is made on a case-by-case basis. Neither Section 504 nor its implementing regulations define the term "substantially limits" but the term is not necessarily synonymous with "unable to perform" or "significantly restricted in "a major life activity.

Except for ordinary eye glasses or contact lenses, the ameliorative effects of mitigating measures may not be considered when assessing whether a student has an impairment that substantially limits a major life activity. "Mitigating measures" include, but are not limited to: medication; medical supplies, equipment or appliances; low-vision devices (devices that magnify, enhance, or otherwise augment a visual image); prosthetics (including limbs and devices); hearing aids and cochlear implants or other implantable hearing devices; mobility devices; oxygen therapy equipment and supplies; use of assistive technology; reasonable accommodations or auxiliary aids or services; and learned behavioral or adaptive neurological modifications.

A temporary impairment does not constitute a disability for purposes of Section 504 unless it is of such severity that it results in a substantial limitation of one or more major life activities for an extended period of time. This determination is to be made of a case-by-case basis.

If a student has an impairment that is episodic or in remission, the District must consider whether the impairment, *when active*, would substantially limit a major life activity. If it would, then the student meets the definition of a student with a disability.

"Major Life Activities"

To be eligible under Section 504, a student's physical or mental impairment must interfere with one or more "major life activities." A "major life activity" includes, but is not limited to functions such as:

- Caring for myself
- Performing manual tasks
- Walking
- Seeing
- Hearing
- Speaking
- Breathing
- Learning
- Working
- Eating

- Sleeping
- Standing
- Lifting
- Bending
- Reading
- Concentrating
- Thinking
- Communicating
- Operation of major bodily functions (including but not limited to functions of the immune system, normal cell growth, digestive, bowl, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions)

This list is not exhaustive. An activity or function not found on the list may nonetheless be a major life activity. A student is protected from all the forms of discrimination and is eligible under Section 504 if the student has an impairment that substantially limits one or more major life activities, including, but not limited to, learning.

"Record of Impairment" and "Regarded as Having an Impairment"

Section 504 also protects students from discrimination who have a record of an impairment or who are regarded as impaired. A student is "regarded as" having an impairment if the District perceives the student as impaired. The District shall not treat students differently based upon a record that shows that the student was disabled in the past, or based upon an assumption or perception of disability. The District is not required to develop a Section 504 plan for a student who either has a record of an impairment or who is regarded as having an impairment, but who is not otherwise currently eligible under Section 504.

"Current User of Illegal Drugs"

A student who is currently engaging in the illegal use of drugs is not eligible for services or protection under Section 504 when the District takes disciplinary action on the basis of such drug use even if the student is otherwise a student with a disability. A student who is a former drug user or who is participating in a drug rehabilitation program, however, may be eligible for Section 504 services and protection if the student otherwise meets the definition of an "individual with a disability: as described above.

CHILD FIND

Every year, the District shall attempt to identify and locate every student residing in the district who may be a student with a disability under Section 504, regardless of whether he or she is receiving a public education. The District shall notify parents of those students of the District's Section 504 obligations.

The District may satisfy the notification obligation by advertising, by posting notices in places likely to be visited by qualified students with disabilities and their parents, by including notices in District publications and on its website, and by directly contacting parents of those students who the District believes to be eligible.

The District must also ensure that the information in its Section 504 notices is written in a manner that is easily understandable to a parent. The notice should also contain the name and contact information for the District's 504 coordinator.

PRE-REFERRAL ASSISTANCE

Pre-referral assistance is an important first step in serving students experiencing difficulties in school. Teachers may vary instructional and behavioral methodologies and expectations, and, by so doing meet students' educational and behavioral needs; and thereby strengthen the general education program and reduce unnecessary Section 504 and IDEA formal referrals.

Pre-referral assistance, including strategies such as response-to-intervention ("RTI"), is not intended to impede or be a substitute for necessary referrals for consideration of eligibility under the Individuals with Disabilities Education Act ("IDEA") or Section 504. If, at any time, a teacher, counselor, administrator, or other professional staff member has reason to believe that the student's difficulties may be attributable to a disability, the student should be referred for an evaluation. If a parent/guardian at any time requests an evaluation, the District must either honor that request or notify the parent/guardian of his/her due process rights under the IDEA, or Section 504, as applicable.

PARENTS RIGHTS

Section 504 guarantees certain rights to parents of students with disabilities. A Section 504 Notice of Procedural Safeguards (Form C) has been developed for distribution to parents.

SECTION 504: THE PROCESS

This section of the Manual addresses important steps in the Section 504 process including: referral, evaluation, eligibility determination, development of the Section 504 Plan, review, and reevaluation.

A. Referral

A student who, because of a suspected disability, is believed to need services under Section 504 is typically referred for a Section 504 evaluation by a parent, guardian, teacher, other certified school employee, the student if 18 years of age or older, or other concerned adult individual. Upon the receipt of a referral:

- The referral should be reduced to writing. (Form B)
- The parent should be provided written notice of the referral, and be asked to provide written consent to a Section 504 evaluation. (Form D)
- The parent should be provided with a copy of "Section 504 Notice of Procedural Safeguards" (Form C) with notice of the referral.

Once the District has received parent consent to evaluate, the District may begin the evaluation process. If a parent refuses to consent to an initial evaluation, the District may, but is not required to, use due process hearing procedures to seek to override the parent's refusal to consent to the evaluation. Additionally, if a parent refuses to consent to an evaluation that is necessary for a determination of eligibility, the 504 Team may determine that the student is not eligible under Section 504.

B. Evaluation

The evaluation is the starting point for determining whether a student is an eligible student under Section 504. The District is required to conduct an evaluation before providing Section 504 services. The nature and extent of the information needed to make a Section 504 eligibility decision is determined on case-by-case basis by a group of persons knowledgeable about the student, the meaning of evaluation data, and the placement options, i.e., the Section 504 Team. Information obtained through the evaluation process must be documented and all significant factors must be considered. The District may, but is not required to, use the same evaluation process used to evaluate students under the IDEA. The evaluation must draw upon information from a variety of sources and may include:

- School records review
- Observations of the student
- Standardized tests or other assessments by school staff

- Parent/Student/Teacher interviews
- Behavior rating scales or other checklists
- Pertinent medical information
- Information provided by the parent
- Other relevant information

Where formal testing is determined to be necessary, the evaluation procedures must ensure that:

- Tests and other evaluation materials have been validated for the specific purpose for which
 they are used and are administered by trained personnel in conformance with the instructions
 provided by their producer.
- 2. Tests and other evaluation materials include those tailored to assess specific areas of educational need and not merely those which are designed to provide a single general intelligence quotient.
- 3. Tests are selected and administered so as best to ensure that when a test is administered to a student with impaired sensory, manual, or speaking skills, the test results accurately reflect the student's aptitude or achievement level or whatever other factor the test purports to measure, rather than reflecting the student's impaired sensory, manual, or speaking sills (except when those skills are the facets that the tests purport to measure).

A medical diagnosis of a physical or mental impairment does not, in and of itself, determine Section 504 eligibility. As mentioned above, Section 504 requires the District to draw upon information from a variety of sources in making its eligibility determination. A medical diagnosis is only one source of information. Additionally, the District may request, but cannot require a parent to provide a medical statement or authorize the release of the student's medical information as part of the evaluation process. If the District determines, based on the facts and circumstances of the individual case, that a medical assessment is necessary for an appropriate evaluation, the District must ensure that the child receives this assessment at no cost to the parents. If alternative assessment methods meet the evaluation criteria, those methods may be used in lieu of a medical assessment. If a parent refuses to consent to medical assessment and alternate assessment methods are not available, the 504 Team must proceed to make an eligibility determination based on the information it has on hand.

Absent extenuating circumstances, the District's evaluation and the development of a Section 504 Plan, if necessary, should be completed no later than 30 school days following the District's receipt of the parent's consent to evaluate. If an extension of time is required, the parent must be notified in writing of the extension, the reason for the extension, and the expect date of completion of the process.

C. Eligibility Determination

The eligibility determination must be made by a group of persons knowledgeable about the student, the meaning of evaluation data, and placement options and must be documented in writing. The parent of the student should be given a meaningful opportunity to provide input into identification, evaluation, and placement decisions for his/her child. Therefore, the parent should typically be included in this process.

D. Section 504 Plan

Where a student is found to be eligible under Section 504, the need for a Section 504 Plan must be determined. (**Form K**). The Section 504 Team, which should include the parent, will be responsible for determining the services that are needed to provide the student a FAPE. The Plan should specify how services will be provided and by whom.

The Section 504 Plan shall be signed by the Section 504 Coordinator/Designee, indicating the District's intent to implement the plan. A copy of the Plan, along with the Section 504 Notice of Procedural Safeguards (**Form C**), must be provided to the parent.

If a Section 504 Plan is developed for a student, all school personnel with implementation responsibilities should be informed of the existence and particulars of the Plan. Failure to implement the Plan can result in non-compliance with Section 504.

E. Review of Section 504 Plan

The teacher or other person(s) designated by the Section 504 Team shall monitor the student's progress and the effectiveness of the student's Plan. The teacher or other designated person will contact the parent (in person or by phone) at least annually to discuss whether the 504 Plan continues to be appropriate or whether any changes are necessary. If changes are to be considered, the Section 504 Team must be convened.

In addition, the Section 504 Team should be convened and the student's 504 Plan updated whenever the student's situation warrants a review (e.g., during natural transition periods, when a teacher or parent raises concerns, or when the student's performance changes).

F. Reevaluation

A reevaluation should be completed at least once every 3 years to redetermine eligibility under Section 504 and before any significant change in the student's placement.

SUSPENSION AND EXPULSION OF SECTION 504 STUDENTS

Students who are eligible under Section 504 have certain additional protections when charged with a violation of the Code of Student Conduct which may result in a suspension or expulsion of a student with a disability under the IDEA, it is necessary to conduct a manifestation determination for a Section 504 student when:

- The suspension or expulsion will be for more than 10 consecutive school days, or
- The student has been subjected to a series of suspensions that total more than 10 school days in a school year and a pattern of exclusion exists. Whether a series of suspensions creates a pattern of exclusion is determined on a case-by-case basis taking into account the following factors: the length of each suspension, the proximity of the suspensions to one another, the similarity of the behavior that resulted in the removals, and the total amount of time the student is excluded from school.

If either of the situations above applies, then the District is required to conduct a manifestation determination should be conducted within 10 school days of the decision to change the student's placement. The parent must be invited to participate in the meeting and provided a copy of the Section 504 Notice of Procedural Safeguards (<u>Form C</u>). The purpose of the manifestation determination is to review whether the student's misconduct was caused by, or had a direct and

7

substantial relationship to the student's disability; or whether the conduct was a direct result of the District's failure to implement the student's Section 504 plan (**Form O**).

This determination should be made by a group of persons knowledgeable about the student, the meaning of evaluation data, placement options, the student's Section 504 Plan, and the disciplinary incident. In making its determination, the 504 Team must review all relevant information in the student's file, the student's Section 504 plan, any teacher observations of the student, and relevant information provided by the parent.

If the 504 Team concludes that the student's conduct is a manifestation of the student's disability, the student must remain in (or be returned to) his/her current educational placement, unless the parent and the District agree to change the student's placement. If the 504 Team concludes that the student's conduct is not a manifestation of the student's disability, the District may apply the relevant disciplinary procedures applicable to all students. Unlike the IDEA, there is no requirement to provide a student whose conduct is not a manifestation of the student's disability educational services during a disciplinary change in placement unless services are provided to similarly-situated non-disabled students.

Please note that Section 504 allows a student to be disciplined, without going through the manifestation determination review process, when the infraction results from the student's current illegal use of drugs or alcohol in violation of the Code of Student Conduct.

In the case of a Section 504 student who carries or possesses a weapon to or at school, on school premises, or to or at a school function, the District may place the student in an interim alternative educational setting for up to 45 school days if a student without a disability would be similarly disciplined. The Section 504 team must meet to develop the interim alternate educational setting after evaluating the student as described in this Manual. The interim alternate educational setting must be educationally appropriate and the services provided must enable the student to continue to progress in the general curriculum. The interim alternate educational setting must also address the behavior prompting the disciplinary action.

IMPARTIAL DUE PROCESS HEARING

A parent who disagrees with the identification, evaluation, placement, or the provision of a free appropriate public education of a student with a disability under Section 504 has the right to request an impartial due process hearing. Request for a Section 504 due process hearing must be made in writing to the District's Section 504 Coordinator. Upon receipt of such a request, the necessary arrangement will be made by the District, including the selection of a hearing officer. A person who is an employee of the District, or any person having a personal or professional interest which would conflict with his/her objectivity in the hearing, may not be appointed as a hearing officer.

Any party to a hearing has the right to:

- 1. Be accompanied and advised by counsel or an individual with special knowledge or training about the problems of children with disabilities;
- 2. Present evidence and cross-examine witnesses:
- 3. Obtain a written or electronic verbatim record of the hearing or obtain alternate forms of the verbatim record to be provided in the parent's native language;

- 4. Obtain written or electronic findings of fact and decisions; and
- 5. Seek judicial review of a hearing officer decision.

The District will adhere to the following timeframes if a due process hearing is requested:

- 1. A hearing will be scheduled not more than 30 calendar days following receipt of the parent's written request.
- 2. The hearing officer will, not later than 30 calendar days after the hearing, draft a written decision (with specific findings of fact) and send a copy of the decision to each party and/or their attorneys/ representatives.
- 3. In the absence of an appeal, the District will implement the decision of the hearing officer within 15 calendar days of the District's receipt of the decision.

GRIEVANCE PROCEDURE

A person who believes a student has been discriminated against by the District on the basis of the student's disability or who believes the District otherwise violated Section 504 also has the right to file a complaint through the District's grievance procedure. (**Forms L, and M**). A person who wishes to file a complaint should contact:

504 Coordinator Name
504 Coordinator Title
Clare-Gladwin Regional Education Service District
504 Coordinator Street Address
504 Coordinator City, State, Zip
504 Coordinator Phone

A person may file a complaint with Office of Civil Rights (OCR) if he/she does not wish to use the District's grievance procedure. A person who wishes to file a complaint with OCR should contact:

Office for Civil Rights
U.S. Department of Education
600 Superior Avenue East, Suite 750
Cleveland, OH 44114-2611
Telephone: (216) 522-4970
Fax: (216) 522-2573; TDD: 9877) 521-2172

Email: OCR.Cleveland@ed.gov

A discrimination complaint may be filed with OCR at any time. Additionally, if a person is dissatisfied with the District's resolution of a complaint, that complain may be filed with OCR at the address above within 60 days of the District's resolution.

FORM A	Clare-Gladwin Regional Edu	cation Service District	SECTION 504 CHECKLIST			
Student Name:		Date of Birth:				
School Building Attending:		Grade:				
1. Section 504 Referra	I					
Received signed	Section 504 Referral and Consent for	Evaluation (Form D)				
Date received by t	he School District					
2. Parent Consent for E	Evaluation					
Provide parent Se	ction 504 Notice of Referral and Cons	sent for Evaluation (<u>Form D</u>)				
Provide parent Se	ction 504 Notice of Procedural Safeg	uards (<u>Form C</u>)				
Date parent conse	ent received by the District					
	nould be completed (30 school days ceived for initial evaluation)					
3. Parent Consent for E	valuation					
Identify Section 50 and placement op	14 team members (persons who are k tions)	nowledgeable about the student, th	ne meaning of evaluation data,			
Determine needed	evaluation data. <i>Note</i> : Evaluation in	formation should be obtained from	a variety of sources.			
Seek parent conse	ent to obtain medical information, if ap	opropriate (<u>Form F</u>)				
Contract of the Contract of th	Send letter to Physician (Form G) and Physician's Statement (Form H) <i>Note</i> : A parent is not required to provide the School District medical information or permission to contact the student's physician.					
Use Teacher Inpu	t forms (<u>Form I</u>), if appropriate					
4. Section 504 Meeting						
Determine date, tir	ne, and location for meeting					
Notify Section 504	team members of meeting date, time	e, and location.				
Send parent Section	on 504 Meeting Notice and Invitation	(Form J)				
Convene meeting						
Review evaluation	data and determine eligibility/continu	ed eligibility				
Complete Section	504 Plan (<u>Form K</u>)					
Provide parent Not	ice of Procedural Safeguards (Form	<u>C</u>)				
If parent is not pres	sent at meeting, send copy of paperw	ork, including Notice of Procedural	Safeguards, to home address			
5. Section 504 Plan Imp	lementation					
Notify persons with	implementation responsibilities of th	e Plan's existence and their respon	sibilities under the plan			
Monitor the studen	t's progress and the effectiveness of	the Plan				
Review the Plan a	t least annually and whenever the stu	ident's situation warrants review				
Reevaluate at leas	t every three years					

FORM B

Clare-Gladwin Regional Education Service District

SECTION 504 REFERRAL FOR EVALUATION

Date of Referral:							
Student Name:					Date of Birth:		
School Building A	ttending:				Grade:		
Reason for Referr social/emotional, m			the nature of you	ır concern(s), e	.g. academic, b	ehavioral, gross	fine motor,
Pre-referral intervention			tervention, suppo	orts, or other ad	ctions tried prior	to the referral ir	an effort to
Has the student bee	en referred,	evaluated, or pro	ovided special e	ducation or 504	services in the	past?	
Yes No		If yes, please e	explain below.				
			,				
Person Making Refe	erral:			Title/Position:			
Phone:				Email:			
Please submit forn	i to:	-					

504 Coordinator Name

504 Coordinator Title

504 Coordinator Street Address

504 Coordinator City, State, Zip

504 Coordinator Phone

FORM C

Clare-Gladwin Regional Education Service District

NOTICE OF SECTION 504 PROCEDURAL SAFEGUARDS

The following is a brief summary description of the rights provided by Section 504 of the Rehabilitation Act of 1973 to students with disabilities, or suspected disabilities, and some related rights provided by Title VI of the Civil Rights Act of 1964 and the Family Education Rights and Privacy Act. The intent of the law is to keep you fully informed about decisions concerning your child and to inform you of your rights in the event you disagree with any decisions concerning your child. You have the right to:

- 1. Have the District advise you of your rights under federal law;
- 2. Receive notice with respect to Section 504 identification, evaluation, and/or placement of your child;
- 3. Have an evaluation and placement decision for your child based upon information from a variety of sources and which is made by a team of persons knowledgeable about the student, the meaning of evaluation data, and placement options;
- 4. Have your child receive a free appropriate public education, which is the provision of regular or special education and related aids and services that are designed to meet individual educational needs of your child as adequately as the needs of students without disabilities are met, if the child is Section 504 eligible;
- 5. Have your child be educated with non-disable students to the maximum extent appropriate, if the child is Section 504 eligible;
- 6. Have your child take part in and receive benefits from the District without discrimination on the basis of disability;
- 7. Have your child educated in facilities and receive services comparable to those provided to non-disabled students;
- 8. Examine all relevant records of your child, including those relating to decisions about your child's Section 504 identification, evaluation, educational program, and placement; and obtain copies of those records at a reasonable cost, unless the fee would effectively deny you access to the records;
- 9. Receive information in your native language and primary mode of communication;
- 10. Have a periodic reevaluation of your child, including an evaluation before any significant change of placement;
- 11. Have your child given an equal opportunity to participate in nonacademic and extracurricular activities offered by the District;
- 12. Request and participate in an impartial due process hearing regarding the identification, evaluation, or placement of your child, including a right to be represented by counsel in that process and to appeal an adverse decision;
- 13. File a complaint in accordance with the District's grievance procedures or with the U.S. Department of Education, Office for Civil Rights.

Clare-Gladwin Regional Education Service District

SECTION 504 - NOTICE OF REFERRAL AND CONSENT FOR EVALUATION

mm/dd/yyyy

	_		
L	J		
1	_	C	'n

Dear Parent/Guardian Name(s)

Your child has been referred for an evaluation under Section 504 of the Rehabilitation Act of 1973 ("Section 504"). Section 504 prohibits discrimination on the basis of disability in any program or activity receiving federal financial assistance and requires the school district to provide eligible students a free appropriate public education designed to meet the student's individual educational needs as adequately as the needs of non-disabled students are met.

In order to be eligible for services under Section 504, a student must have a physical or mental impairment that substantially limits one or more major life activities. In determining whether a student meets these criteria, the school district will draw upon information from a variety of sources which may include the following:

- School records
- Observations
- Standardized tests or other assessments
- Parent/Student/Teacher interviews
- Behavior rating scales or other checklists
- Pertinent medical information
- Information provided by the parent/guardian
- Other relevant information

Your child's teacher(s), building, administrator, counselor, and other individuals (school psychologist, school nurse, etc.) may be involved in the evaluation process. Once the evaluation is completed, a meeting will be scheduled to discuss the results of the evaluation. You will be notified of the time, date, and location of the meeting and are welcome to attend and participate in the decision-making process.

The purpose of this letter is to advice you that the school district proposes to evaluate your child under Section 504 and to obtain your consent for the evaluation. In addition, enclosed is a copy of the Notice of Procedural Safeguards which describes the rights afforded parents under Section 504.

Please indicate on the enclosed form your consent for the Section 504 evaluation and return this forms to me as soon as possible. Please feel free to contact me if you have any questions.

Sincerely,

504 Coordinator Name

504 Coordinator Title

504 Coordinator Street Address

504 Coordinator City, State, Zip

504 Coordinator Phone

Enclosures

FORM E

Clare-Gladwin Regional Education Service District

SECTION 504 – PARENT CONSENT FORM

Student Name:			Date of Birth:			
School Building Attending:			Grade:			
		3.545				
Parent/Guardian Name:						
Address:						
Phone:		Email:				
	CONSENT FOR SECTION	ON 504 E	VALUATION			
upon information from a varie observations of the student,	I understand that my child has been referred for an evaluation under Section 504. The evaluation will draw upon information from a variety of sources, which may include, but is not limited to: a school record review, observations of the student, parent/child/teacher input or interviews, assessments, and other relevant information. The purpose of the evaluation is to determine whether my child is eligible for services under					
	(Check all ti	nat apply	·)			
I have received a copy of the Section 504 Notice of Procedural Safeguards. I consent to the Section 504 evaluation. I do not give permission for the Section 504 evaluation.						
Signature of Parent/Gua	Signature of Parent/Guardian Date					
Please return this form to:						
504 Coordinator Name 504 Coordinator Title 504 Coordinator Street Address 504 Coordinator City, State, Zip 504 Coordinator Phone						
For School Use Only						
Date consent form received by School District:						

FORM F

Clare-Gladwin Regional Education Service District

SECTION 504 – AUTHORIZATION FOR RELEASE AND EXCHANGE OF MEDICAL INFORMATION

Student Name:			Date of Birth:	
School Building Attending	:		Grade:	
Parent/Guardian Name:				
Address:				
Phone:		Email:		
I hereby authorize the releas Regional Education Service I		wise confidential me	edical information bet	ween the Clare-Gladwin
Physician's Name:				
Address:				
Phone:		Email:		
I understand that any informa not be transmitted to a third p earlier revoked by me in writi	party without my permiss			
Date:				
		Signature of Pare	nt/Legal Guardian	
		Relationship to S	tudent	

PLEASE FORWARD DOCUMENTS TO:

504 Coordinator Name 504 Coordinator Title

504 Coordinator Street Address

504 Coordinator City, State, Zip

504 Coordinator Phone

FORM G

Clare-Gladwin Regional Education Service District

SECTION 504 - COVER LETTER TO PHYSICIAN

mm/dd/yyyy

Physician's Name Medical Facility/Practice Name Physician's Address Physician City, State, Zip

Re: Student's Full Name and Date of Birth

Dear Physician's Name

The above-named student is currently being evaluated by the Clare-Gladwin Regional Education Service District for the purpose of determining the student's eligibility for services under Section 504 of the Rehabilitation Act of 1973. In order to be eligible under Section 504, the student must have a physical or mental impairment that substantially limits a major life activity.

Enclosed is an authorization for release of information to the School District signed by the student's parent/guardian. Please assist us with our evaluation by completing and returning the enclosed Physician's Statement no later than Date by which the SD requires the information followed by.

Please send to:

504 Coordinator Name 504 Coordinator Title 504 Coordinator Street Address 504 Coordinator City, State, Zip 504 Coordinator Phone

We appreciate your assistance in this evaluation process. Please contact me if you have any questions. Thank you in advance for your cooperation.

Sincerely,

504 Coordinator Name 504 Coordinator Phone

C:

Enclosures – Physician's Statement
Enclosures – Authorization for Release of Information

FORM H

Clare-Gladwin Regional Education Service District

SECTION 504 - PHYSICIAN'S STATEMENT

nt Name:		I	Date of Birth:				
	•	sist the S	School District	in its	Section 5	04 evaluatior	n.
Does the studiagnosis?	dent have a physical or mental impairment? Ye	s	No	If yes	, what is	the student's	3
					e e		
Describe the	student's current prognosis and the nature and e	extent of	possible char	nge in	the stude	ent's condition	n?
		airment (on the studen	t's abil	ity to acc	ess, participa	ate
		s of whic	ch the School	Distric	t should	be aware	
		ol Distric	ct should be a	ware?	Yes	No [
Additional co	nments to assist in educational planning for stud	lent.					
r.		7					
an's Signature:			Date:				\neg
		-					
an's Name:			Phone:		^		
:			Email:				
	Does the studiagnosis? Describe the in, or benefit for benefit fo	cian's Section: Please provide the following information to assist supporting documentation if needed. Does the student have a physical or mental impairment? Ye diagnosis? Describe the student's current prognosis and the nature and of the student's current prognosis and the nature and of the physical or mental impair, or benefit from school/educational experience? Does the student have any other special health/medical issue which could affect the student in the school setting? Is the student currently on any medications of which the School fyes, please list medication(s), dosage, and frequency. Additional comments to assist in educational planning for student's Signature:	cian's Section: Please provide the following information to assist the Supporting documentation if needed. Does the student have a physical or mental impairment? Yes diagnosis? Describe the student's current prognosis and the nature and extent of What are the anticipated effects of the physical or mental impairment in, or benefit from school/educational experience? Does the student have any other special health/medical issues of which which could affect the student in the school setting? Is the student currently on any medications of which the School District If yes, please list medication(s), dosage, and frequency. Additional comments to assist in educational planning for student.	cian's Section: Please provide the following information to assist the School District supporting documentation if needed. Does the student have a physical or mental impairment? Yes No diagnosis? Describe the student's current prognosis and the nature and extent of possible chart what are the anticipated effects of the physical or mental impairment on the student in, or benefit from school/educational experience? Does the student have any other special health/medical issues of which the School which could affect the student in the school setting? Is the student currently on any medications of which the School District should be at If yes, please list medication(s), dosage, and frequency. Additional comments to assist in educational planning for student. Date: Date:	cian's Section: Please provide the following information to assist the School District in its supporting documentation if needed. Does the student have a physical or mental impairment? Yes No If yes diagnosis? Describe the student's current prognosis and the nature and extent of possible change in What are the anticipated effects of the physical or mental impairment on the student's abil in, or benefit from school/educational experience? Does the student have any other special health/medical issues of which the School District which could affect the student in the school setting? Is the student currently on any medications of which the School District should be aware? If yes, please list medication(s), dosage, and frequency. Additional comments to assist in educational planning for student.	cian's Section: Please provide the following information to assist the School District in its Section 5 supporting documentation if needed. Does the student have a physical or mental impairment? Yes No If yes, what is diagnosis? Describe the student's current prognosis and the nature and extent of possible change in the student what are the anticipated effects of the physical or mental impairment on the student's ability to acc in, or benefit from school/educational experience? Does the student have any other special health/medical issues of which the School District should which could affect the student in the school setting? Is the student currently on any medications of which the School District should be aware? Yes If yes, please list medication(s), dosage, and frequency. Additional comments to assist in educational planning for student.	cian's Section: Please provide the following information to assist the School District in its Section 504 evaluation supporting documentation if needed. Does the student have a physical or mental impairment? Yes No If yes, what is the student's diagnosis? Describe the student's current prognosis and the nature and extent of possible change in the student's condition. What are the anticipated effects of the physical or mental impairment on the student's ability to access, participalin, or benefit from school/educational experience? Does the student have any other special health/medical issues of which the School District should be aware which could affect the student in the school setting? Is the student currently on any medications of which the School District should be aware? Yes No If yes, please list medication(s), dosage, and frequency. Additional comments to assist in educational planning for student.

FORM I

Clare-Gladwin Regional Education Service District

SECTION 504 – TEACHER INPUT

Student Name:				Date of Birth:	
Геасher Name:				Subject:	
concerns below	any concerns about this w: concerns (please de	L	No	If yes, pleas	e specify the type of
Behavioral	concerns (please de	escribe):			
Other concer	ns (please describe):				
	y accommodations, i nd indicate how the st				address the above
3. The student's	current grade in clas	ss is:			
	ident have earned thies the concern(s)?		the accom	modations, interve	ntions, or strategies you
Additional comme	ents:				

Teacher's Signature

Date

FORM J	Clare-Gladwin Region	nal Education	Service District	i
	SECTION 504 - MEET	ING NOTICE A	ND INVITATION	<u>N</u>
Student Name:			Date of Birth:	
Teacher Name:			」 │ Grade:	
reacher Name.			Grade.	
	m	nm/dd/yyyy		
Dear Parent/Guardian	Name(s)			
the Rehabilitation Act of	I to attend a meeting to determine of 1973. If it is determined that you did and revised) at this meeting.			
The meeting w	rill be held on: Meeting Date			
	Meeting Time			
	at: Meeting Location			
The School District has	s invited the following persons to a	ttend the meetin	g:	
NAME	POSITION/TITLE	1	NAME	POSITION/TITLE
				If the most in a date of
	raged to attend this meeting and p or you, please contact me at your			
Please feel free	e to contact me if you have any qu	estions.		
Sincerely,				
504 Coordinate	or Name			
504 Coordinate	or Title			
Enclosures (Procedura	al Safeguards and Envelope)			
	S PORTION OF THE FORM IN T	HE ENCLOSED	ENVELOPE	
I will attend the	Section 504 meeting.			
I will not be able	e to attend and request the meetin	g be reschedule	d.	
I am not able to home address.	attend, but request that the meeti	ng be held witho	ut me and that the	e paperwork be sent to my

Parent/Guardian's Name (Print)

Student's Name (Print)

FORM K-1	Clare-Gladwin Regional Education Service District
	SECTION 504 PLAN
Date of Meeting:	
Student Name:	Date of Birth:
Sahaal Building Attandin	Condo:
School Building Attendin	g: Grade:
Parent/Guardian Name:	
Address:	
Phone:	Email:
PURPOSE OF MEETING	
Initial Rev	view Redetermination Other
PARENT CONTACT	
	hone, Email, Letter, Etc.
	ame of Person Contacting Parent Parent Contacted
Date Contacted.	ate Falent Contacted
MEETING PARTICIPANTS	
	ude persons knowledge about the student, the meaning of evaluation data, and placement
Parent/Guardian	Administrator/Designee
5	

Parent/Guardian	Administrator/Designee
Parent/Guardian	Student's Teacher
Additional School Staff	Additional School Staff
Additional School Staff	Additional School Staff
Other	Other
Other	Other

SUMMARY OF EVALUATION INFORMATION
Based on the evaluation information reviewed:
Does the student have a physical or mental impairment? Yes No If yes, specify the
impairment:
Does the impairment substantially limit one or more major life activities? Yes yes, specify the major life activity(ies) and describe how the impairment substantially limits the activity(ies)
ELIGIBILITY DETERMINATION
Student is eligible under Section 504
Student is not eligible under Section 504
The student has qualifying disability under Section 504, but does not require a Section 504 Plan at this time.
Rationale:

ACCOMMODATION PLAN (Complete this section only is student is determined eligible)

List the regular or special education, related aids, and services that are necessary for this student to receive a free appropriate education and to have equal access and opportunity to participate in school programs and activities. Note: each service or accommodation should be directly related to the substantial limitation caused by the student's impairment. Attach additional pages as necessary.

AREA OF NEED	SERVICE/ACCOMODATION	PERSON RESPONSIBLE
NOTICE	OF INTENT TO IMPLEMENT SECTION	504 PLAN
Plan implementation date:	Next review da	ate:
Person responsible for implementation/r	eview:	
Date:		
	Signature of Section 50	04 Coordinator/Designee
PARENT/GUARDIAN SIGNATURE		
I have received the Notice of Pro	cedural Safeguards under Section 504	
I agree with the determination at	oove.	
	above and understand that I have the rig t for a hearing with the Section 504 Coord	
	ible for a Section 504 Plan but do not wis hat I may request that the District review r	
Date:		
•	Signature of Parent/Gu	ardian

SECTION 504 – GRIEVANCE PROCEDURE

The Clare-Gladwin Regional Education Service District has adopted the following Grievance Procedure for addressing complaints of discrimination under Section 504. A person is not required to use this procedure and may instead file a complaint directly with the U.S. Department of Education's Office for Civil Rights, 600 Superior Avenue East, Suite 750, Cleveland, OH 44114-2611:

- A person who believes that he/she has been discriminated against by the Clare-Gladwin Regional Education Service District is encouraged, but is not required, to discuss the matter informally with the appropriate building principal, in the case of a student, or his/her immediate supervisor, in the case of an employee.
 - A. If the building principal or the immediate supervisor is the subject of the complaint, or the grievant is not a student or employee, the grievant may, instead, contact the Clare-Gladwin Regional Education Service District Section 504 Coordinator.
 - B. The person receiving the complaint shall verbally covey his/her findings to both the person who alleged the violation and the person who is the subject of the complaint within 10 business days.
- Step 2: If the informal Step 1 process does not resolve the matter, or if the grievant does not wish to use the informal procedures set forth in Step 1, a written complaint may be submitted to the Clare-Gladwin Regional Education Service District Section 504 Coordinator who will investigate the complaint.
 - A. If the Section 504 Coordinator is the subject of the complaint, the complaint should be submitted to the Superintendent of Schools who will appoint administrator to conduct the investigation.
 - B. The complaint shall be signed by the grievant and include the:
 - (1) Grievant's name and contact information;
 - (2) Facts of the incident or action complained about;
 - (3) Date of the incident or action giving rise to the complaint;
 - (4) Type of discrimination alleged to have occurred; and
 - (5) Specific relief sought.
 - (6) Note: Witness names and other evidence as deemed appropriate by the grievant may also be submitted.
 - C. An investigation of the complaint will be conducted within 10 business days following the submission of the written complaint. The investigation shall include an interview of the parties and witnesses, a review of relevant evidence, and any other steps necessary to ensure a prompt and thorough investigation of the complaint.
 - D. A written disposition of the complaint shall be issued with 10 business days of completion of the investigation, unless a specific written extension of time is provided to the parties. Copies of the disposition will be given to both the grievant and the person who is the subject of the complaint.

FORM L-2 Clare-Gladwin Regional Education Service District

Step 3: If the grievant wishes to appeal the decision in Step 2 above, he/she may submit a signed, written appeal to the Superintendent of Schools within 10 business days after receipt of the written disposition. The Superintendent or his/her designee shall respond to the complaint, in writing, within 10 days of the date of the appeal. Copies of the response shall be provided to both the grievant and the person who is the subject of the complaint.

The Clare-Gladwin Regional Education Service District provides assurance that it strictly prohibits any form of retaliation against persons who utilize this Grievance Procedure. Further, a grievant making a complaint is neither required to prosecute the matter nor confront the alleged discriminator or harasser when that would be inappropriate.

If you have questions regarding these procedures or want to file a complaint, please contact the Clare-Gladwin Regional Education Services District Section 504 Coordinator:

504 Coordinator Name
504 Coordinator Title
Clare-Gladwin Regional Education Service District
504 Coordinator Street Address
504 Coordinator City, State, Zip
504 Coordinator Phone

FORM M

Clare-Gladwin Regional Education Service District

SECTION 504 - COMPLAINT FORM

Name of Injured Party:				
Address:				
Phone:		Email:		
If the injured party is a student,	please also provide the following	ng informat	ion:	
School Building Attending:			Date of Birth:	
Complainant's Name:			Grade:	
Relationship to Student:				
Address:				
Phone:		Email:		
	plation of Section 504. Please dates/times/locations, etc. Atta			cific incident(s), as well as
Describe your proposed	d resolution to address the alleg	ged problen	n(s) violation(s).	
Date:	Complaint's Signature:			

SUBMIT THIS FORM TO:

504 Coordinator Name
504 Coordinator Title
Clare-Gladwin Regional Education Service District
504 Coordinator Street Address
504 Coordinator City, State, Zip
Code 504 Coordinator Phone

A person who believes that he/she has been discriminated against by the Clare-Gladwin Regional Education Service District on the basis of disability may file a complaint through the District's grievance procedure. A complaint may also be filed with the Office for Civil Rights (OCR), U.S. Department of Education, 600 Superior Ave East, Suite 750 Cleveland, OH 44114. You may file a complaint with OCR at any time. Filing a complaint with the School District is not a prerequisite to filing with OCR.

Clare-Gladwin Regional Education Service District

SECTION 504 - MANIFESTATION DETERMINATION MEETING NOTICE AND INVITATION

Student Name:		Date of Birth:	
School Building Attend	ing:	Grade:	
		mm/dd/www	
		mm/dd/yyyy	
Dear Parent/Guardian Na	ame(s)		
	o attend a Section 504 manife estation of his/her disability.	estation determination meeting to rev	iew whether your child's
The meeting will	be held on: Meeting Date		
	Meeting Time		
	at: Meeting Location	n	
The School Distri	ct has invited the following p	ersons to attend the meeting:	
NAME	POSITION/TITLE	NAME	POSITION/TITLE
:			
		d participate in the decision-making pour earliest convenience and we will a	
Please contact me	e if you have any questions.		
Sincerely,			
504 Coordinator N 504 Coordinator T			
Enclosure			
PLEASE RETURN THIS I	PORTION OF THE FORM IN	N THE ENCLOSED ENVELOPE	
I will attend the Ma	anifestation Determination me	eeting.	
I will not be able to attend and request the meeting be rescheduled.			
I am not able to attend, but request that the meeting be held without me and that the paperwork be sent to my			
home address.	end, but request that the me	eding be neld without the and that the	e paperwork be sent to my
]	
Student's Name (Print)		Parent/Guardian's Name	o (Print)

Clare-Gladwin Regional Education Service District - Section 504 - Manifestation Determination Meeting Notice - N-1

FORM 0-1

Clare-Gladwin Regional Education Service District

SECTION 504 - MANIFESTATION DETERMINATION REVIEW

		50° 50 500 500 500 500 500 500 500 500 5	
Date of Review:	Da	Date of Current Section 504 Plan:	
STUDENT INFORMATION	ON		
Student Name:			
School Building Attend	ling:	Grade:	
Parent/Guardian Name	:	400	
Address:			
Phone:		Email:	
PARENT CONTACT			
and pair stand development in the Sang Sang Sang to the Sang Sang Sang Sang Sang Sang Sang Sang			
	1ethod of Contact: Phone, Email, Letter, Etc.		
Contacted By:	Name of Person Contacting Parent	t	
Date Contacted:	Date Parent Contacted		
MEETING PARTICIPANTS			
Parent/Guardian		Administrator/Designee	
Parent/Guardian		Student's Teacher	
Additional School Staff		Additional School Staff	
Additional School Staff		Additional School Staff	
Other		Other	
Other		Other	
CURRENT DRUG OR ALCOHOL USE			
Does the student currently engage in the illegal use of drugs or alcohol? Yes			
2. Is the student being disciplined for the possession or use of illegal drugs or alcohol? Yes No			
If the answer to both questions is yes, the student is not entitled to a manifestation determination			
review and the student may be disciplined to the same extent that such disciplinary action is taken against students without disabilities.			

FORM O-2

Clare-Gladwin Regional Education Service District

CONSIDERATIONS FOR REVIEW – In carrying out a manifestation determination review, the 504 Team shall: 1. Describe the behavior or incident that is subject to discipline. 2. Review and summarize relevant information in student's file. Review and summarize relevant information in student's Section 504 plan. 4. Review and summarize relevant teacher observations of the student. Review and summarize relevant information provided by the parent. MANIFESTATION DETERMINATION In relation to the behavior subject to discipline (see previous page): 1. Was the conduct in question caused by or did it have a direct and substantial relationship to the student's disability? Yes No 2. Is the student being disciplined for the possession or use of illegal drugs or alcohol? Yes No If the Section 504 team "Yes" to either of the questions above, then the behavior must be considered a manifestation of the student's disability.

FORM O-3 Clare-Gladwin Regional Education Service District

The S	ection 504 team's determination is that the	e behavior subject to discipline: (Check one)
	Is not a manifestation of the student's disability (sapplicable to all students).	school personnel may apply relevant disciplinary procedures
	Is a manifestation of the student's disability.	
Date:		
		Signature of Section 504 Coordinator/Designee
PARE	NT/GUARDIAN SIGNATURE	
	I have received the Notice of Procedural Safegua	ards under Section 504.
	I agree with the determination above.	
	I disagree with the determination above and under hearing by filing a written request for a hearing w	erstand that I have the right to request an impartial due process ith the Section 504 Coordinator.
Date:		

Signature of Parent/Guardian