

Every Student Matters, Every Moment Counts

Morton School District #214

PO Box 1219 Morton, WA, 98356

P: 360-496-5300 F: 360-496-5399

www.morton.k12.wa.us

Morton Jr/Sr High School

152 Westlake Avenue P: 360-496-5137 F: 360-496-6035

Morton Intermediate School

152 Westlake Avenue P: 360-496-5137 F: 360-496-6035

Morton Elementary School

400 Main Avenue

P: 360-496-5143 F: 360-496-0327

ATTACHMENT C: RESOURCE MANAGEMENT TEAM (RMT)

504 Referral Form

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Student:		DOB:	Grade:
Issue Date of Form:		Due Date of Form:	
Parent/Guardian 1:			
Phone:			
Address:			
Email:			
Parent/Guardian 2:			
Phone:			
Address:			
Email:			
Reason for Referral: Check All	That Apply		
☐ Excessive Absences		☐ At Risk; Potential for Drop	pping Out
☐ Consideration for Expulsion		☐ Consideration for Retention	
Physical Injury		☐ Pattern of not Benefiting from Instruction	
☐ Chronic Health Condition		☐ Pattern of Suspensions fro	om School
☐ Substance Abuse			
☐ Other:			

The Morton School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employees have been designated to handle questions and complaints of alleged discrimination: Title IX Coordinator/ADA Coordinator/Civil Rights Compliance Coordinator and Superintendent John Hannah, 152 Westlake Avenue, Morton, WA, 98356, 360-496-5300, jhannah@morton.k12.wa.us, or Section 504 Coordinator Becky Brooks, 152 Westlake Avenue, Morton, WA, 98356, 360-496-5137, bbrooks@morton.k12.wa.us.

Review of Medical Information/Records: Describe any medical concerns currently impacting the student. Consider	
whether the student has any medical diagnoses, if the student is currently taking any medication at school and/or home, is the student currently using any assistive devices, does the student wear glasses, does the student wear a hearing aid,	
etc.	
Pre-Referral Interventions: Describe any current or past supplemental programs/services or interventions provided to the child, such as Title I, LAP, early intervention services, preschool, individualized interventions, etc. Describe any scientific research-based interventions implemented and the results.	Ī
Referral Recommendations from RMT:	
□ 504 recommended - AND 504 Meeting Scheduled	
☐ 504 not recommended at this time	
☐ No disability was identified;	
\square Condition does not substantially impair student's ability in learning or the ability to function at school; or,	
lue Other:	