

Section 504 Checklist

Student Last Name _____ Student First Name _____

School/District _____ DOB _____

	<u>Date</u>	<u>By Whom</u>
1. Student Referral received	_____	_____
2. Initial Information to parent(s) and staff	_____	_____
A. Reviewed purpose of Section 504		
B. Provided Notice of Parent Rights		
C. Received permission for data collection	_____	_____
3. Sent Review of Data/Eligibility Meeting Notification Form to parent(s) and staff	_____	_____
4. Review of Data/Eligibility Meeting Held	_____	_____
5. Developed 504 Plan for qualified student	_____	_____
6. Annual Review	_____	_____
7. Periodic Review of Eligibility	_____	_____