

SECTION 504

PARENT/GUARDIAN MEETING NOTICE AND INTENTION TO PARTICIPATE

Date: _____

To the Parents of: _____

Parent/Guardian: _____

Address: _____

You are requested and encouraged to attend an educational planning meeting to discuss the educational progress and/or placement of your child. The purpose of the meeting is:

- Consideration of 504 eligibility and/or services
- Review of existing eligibility and/or services
- Manifestation Determination

DATE: _____ TIME: _____

LOCATION: _____

ROOM: _____

The following personnel have been invited to this meeting:

- Teacher
- Nurse
- Principal/Administrator
- Teacher
- Psychologist
- Translator/Interpreter
- Student may be requested to attend
- Other _____

A copy of your Parent/Student Rights is attached.

PARENT: PLEASE CHECK THE APPROPRIATE BOX, AND RETURN TO ADDRESS BELOW:

- WE PLAN TO ATTEND, we also understand that we may bring other people.
- WE NEED AN INTERPRETER in my primary language, which is _____.
- WE DO NOT PLAN TO ATTEND. We understand that a school representative will contact us to discuss the 504 meeting results.

PARENT/GUARDIAN SIGNATURE

DATE

Parent: Please return this signed form to:

School District: _____

Contact Person/Title: _____

Address: _____

Phone: _____