

# Section 504 Team Meeting Notification – Team

(Forward a copy to each teacher)

Initial Information \_\_\_\_\_

Review/Eligibility \_\_\_\_\_

Annual \_\_\_\_\_

Other \_\_\_\_\_

Team members:


Please plan to attend a 504 Team Meeting for the following student:

**Student** \_\_\_\_\_

**Date** \_\_\_\_\_

**Time** \_\_\_\_\_

**Location** \_\_\_\_\_

**Be prepared to discuss student academic (grades, tests, missing assignments, etc.) and social progress, strengths, area(s) of concern, and documented interventions (implemented/duration/& results), student portfolios, behavioral observations, etc.**