

# Section 504 Evaluation

CONFIDENTIAL



Office of Special Education and Student Services  
MONTGOMERY COUNTY PUBLIC SCHOOLS  
Rockville, Maryland 20850

MCPS Form 270-2B  
January 2010

**INSTRUCTIONS:** A Section 504 evaluation is to be conducted by the Section 504 school-based team for non-special education students who may have a disability and be eligible for accommodations under Section 504 of the Rehabilitation Act of 1973, which prohibits discrimination on the basis of disability. The eligibility decision must be based on information from a variety of sources, such as teacher reports, reports of physical or mental condition, observations, adaptive behavior, and aptitude and achievement tests. The Section 504 school-based team must be comprised of persons knowledgeable about the student, the meaning of evaluation data, and placement/accommodations options.

**PURPOSE OF MEETING:**  Initial Evaluation  Review  Removal/Dismissal

Student name \_\_\_\_\_ Grade \_\_\_\_\_ Today's date \_\_\_\_/\_\_\_\_/\_\_\_\_

School \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Student ID # \_\_\_\_\_

Case manager \_\_\_\_\_

The evaluation has been requested for the following reasons \_\_\_\_\_

Regulation ACG-RB requires written parental consent prior to conducting a Section 504 evaluation. My signature below indicates my consent to the Section 504 evaluation. I have received a copy of the Section 504 *Due Process Rights* and the *Parent's Guide to Section 504*.

\_\_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature, Parent/Guardian/Student (if 18 or older) \_\_\_\_\_ Date

Section 504 meeting date \_\_\_\_/\_\_\_\_/\_\_\_\_

**PARTICIPATING MEMBERS** (Note: The Section 504 school-based team must be composed of a group of persons, including persons knowledgeable about the student, the meaning of evaluation data, and placement/accommodations options.)

Name	Title
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

## DATA/INFORMATION REVIEWED

In determining eligibility, the Section 504 school-based team will review various sources of available information such as (indicate each one used). All information must be documented and carefully considered.

<input type="checkbox"/> Aptitude or achievement tests	<input type="checkbox"/> Student health records	<input type="checkbox"/> Results of IEP team decisions (if appropriate)
<input type="checkbox"/> Report cards	<input type="checkbox"/> Educational records	<input type="checkbox"/> Information from parents
<input type="checkbox"/> Teacher reports	<input type="checkbox"/> Medical reports	<input type="checkbox"/> MCPS Form 272-10, <i>Documentation of Interventions</i>
<input type="checkbox"/> Observations	<input type="checkbox"/> Psychological reports	<input type="checkbox"/> Other
<input type="checkbox"/> Student attendance	<input type="checkbox"/> Developmental reports	

Student name \_\_\_\_\_ Grade \_\_\_\_\_ Today's date \_\_\_\_/\_\_\_\_/\_\_\_\_

School \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Student ID # \_\_\_\_\_

**PART I: DETERMINATION OF A PHYSICAL OR MENTAL IMPAIRMENT** (Note: To be eligible under Section 504, a student must have a physical or mental impairment that substantially limits a major life activity.)

CHECK ALL THAT APPLY

A. 1. **Physical Impairment:** The student has  no physical impairment or condition  a physical impairment or condition  
 a cosmetic disfigurement  an anatomical loss

2. If the student has a physical impairment or condition, what body system is affected?

- neurological  musculoskeletal  special sense organs  respiratory, including speech organs  cardiovascular  
 digestive  genito-urinary  hemic and lymphatic  skin  endocrine  skin  endocrine

Specify the physical impairment \_\_\_\_\_

3. Identify the supporting documentation by title, author, and date, and attach copy.

\_\_\_\_\_ /\_\_\_\_/\_\_\_\_  
Title Author Date

**B. 1. Mental or Psychological Disorder:**

The student has:

- no mental or psychological disorder  organic brain syndrome  emotional or mental illness

Specify the mental or psychological disorder \_\_\_\_\_

- serious attentional problems (Note: MCPS form 270-2A: *Authorization for School Psychologists, Section 504, Attentional Disorders Assessment and Worksheet* may be completed and attached.)

2. Identify the supporting documentation by title, author, and date, and attach copy.

\_\_\_\_\_ /\_\_\_\_/\_\_\_\_  
Title Author Date

**PART II: MAJOR LIFE ACTIVITY/ACTIVITIES AFFECTED BY THE IMPAIRMENT**

CHECK ALL THAT APPLY

A. If the student has been found (in Part I) to have either a physical or a mental impairment, check all the major life activities affected by the impairment:

- learning  caring for oneself  performing manual tasks  walking  seeing  hearing  speaking  breathing  
 working  standing  lifting  bending  reading  concentrating  thinking  communicating  
 no major life activity is affected by the impairment

B. Identify the supporting documentation by title, author, and date, and attach copy.

\_\_\_\_\_ /\_\_\_\_/\_\_\_\_  
Title Author Date

**PART III: SUBSTANTIAL LIMITATION** (NOTE: The Section 504 team must review information from a variety of sources. This information must be documented.)

To find that a student who has a physical or mental impairment that affects a major life activity is eligible for services under Section 504, the Section 504 school-based team must find that the impairment "substantially limits" the major life activity. Section 504 requires that the Section 504 school-based team compare the student's performance on the major life activity to that of the average student in the general population. The student must be restricted as to the condition, manner, or duration under which he/she can perform a particular life activity as compared to the average student in the general population.

A. Is the student able to access educational programs and activities without accommodations?  Yes  No

B. Is the student unable to perform the major life activity identified in Part II?  Yes  No

C. Is the student restricted as to the condition, manner, or duration under which he/she can perform the major life activity in Part II? (Note: The Section 504 school-based team must compare the student's restriction to the condition, manner, or duration under which the average student in the general population can perform the same major life activity.)

- Yes  No

EXPLAIN THE TEAM'S RATIONALE:

Student name \_\_\_\_\_ Grade \_\_\_\_\_ Today's date \_\_\_\_/\_\_\_\_/\_\_\_\_

School \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Student ID # \_\_\_\_\_

**PART IV: ELIGIBILITY DETERMINATION**

If the answer to either question B or C in Part III is "Yes," the student must be found eligible under Section 504.

**PART V: FOLLOWUP**

- A. For any student found eligible in part IV, the Section 504 school-based team develops a Section 504 plan to meet that student's needs. The Section 504 team uses MCPS form 270-2, September 2008.
- B. For any student not found eligible under Section 504, the Section 504 team makes appropriate recommendations to address that student's identified needs. These should be documented on MCPS Form 272-10: *Documentation of Interventions*.
- C. Student not found to continue eligibility for 504 accommodations. The 504 plan is removed. The Section 504 team makes appropriate recommendations to address the student's identified needs. These should be documented on MCPS Form 272-10: *Documentation of Interventions*.
- D. The parents should be given a copy of the *Section 504 Due Process* brochure. (Attach the tear-off section with the parent's signature to this form.)

**COMMENTS;**

## **DUE PROCESS SAFEGUARDS INFORMATION**

The following is a summary of the rights granted by federal law to students with disabilities who qualify under Section 504.

If your child qualifies under Section 504, you have the right to

1. Have your child take part in, and receive benefits from, public education programs without being discriminated against on the basis of her/his disability;
2. Receive notice with respect to identification, evaluation, reevaluation, or placement/program decisions involving your child;
3. Have your child receive a free appropriate public education. This includes the right to be educated with students who do not have disabilities to the maximum extent appropriate;
4. Have your child afforded an opportunity, equal to that of students who do not have a disability, to participate in school programs and extracurricular activities sponsored by the school;
5. Have identification, evaluation, and placement/program decisions made based upon information from a variety of sources, and by persons who know the needs of the student, the meaning of evaluation data, and placement/program options;
6. Examine your child's educational records and obtain a copy of those records pursuant to law and Montgomery County Public Schools (MCPS) Regulation JOA-RA;
7. Seek resolution of issues if you are dissatisfied with any decision regarding the identification, evaluation, or placement/program of your child. You may request a Section 504 review by contacting the compliance Officer in the MCPS Department of Student Services; or you may request a Section 504 hearing by an impartial hearing officer by contacting the compliance officer. The hearing provides an opportunity for participation by the parents and/or student and representation by counsel. Either party may appeal the decision of the hearing officer and request a review of that decision. In addition, you may contact the Office for Civil Rights in the U.S. Department of Education.

The person who is responsible for ensuring MCPS' compliance with Section 504 is the compliance officer, Department of Student Services, CESC, Room 211, 850 Hungerford Drive, Rockville, Maryland 20850. Telephone: 301-279-3912; TDD/TTY 301-279-3323.

## **DEFINITIONS**

### **MENTAL OR PHYSICAL IMPAIRMENT**

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

### **MAJOR LIFE ACTIVITIES**

Functions such as learning, caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, working, standing, lifting, bending, reaching, concentrating, thinking, and communicating.

### **SUBSTANTIALLY LIMITS**

(1) Unable to perform a major life activity that the average student in the general population can perform; or (2) restricted as to the condition, manner or duration under which an individual can perform a particular major life activity as compared with the condition, manner, or duration under which the average student in the general population can perform the same major life activity.