



Section 504 Written Notice Form

I. General Information

Student Name: _____ Today's Date: _____

Address: _____

Home Phone: _____ Work Phone: _____

School: _____ Grade: _____

II. Reasons for Notice (Check all that apply)

The Referral for 504 was denied because: _____

- Meeting to Review/Conduct Initial Evaluation for 504
- Meeting to Review 504 Plan and 504 Status
- Meeting to Review/Conduct Reevaluation
- Meeting for Reevaluation before significant placement change
- Meeting to conduct a Manifestation Determination/Evaluation
- Other: _____

III. The meeting of the 504 Team is scheduled as shown below. You are invited to attend and participate in this meeting. This meeting will be held as indicated unless you request to have it rescheduled. If you do not attend, a copy of the Eligibility Date/Determination Form, the Manifestation Determination, and/or other written documentation will be mailed to you.

DAY: _____ **DATE:** _____ **TIME:** _____

PLACE: _____ **ROOM:** _____

IV. MEETING PARTICIPANTS: We anticipate that the following individuals may be in attendance:

_____	_____
_____	_____
_____	_____
_____	_____

V. Please contact the 504 Facilitator shown below if you desire the meeting to be rescheduled or if you would like more information about this notice. Thank you.

504 Facilitator: _____ Phone _____

The **Section 504 Procedural Safeguards** are to be attached to or enclosed with this notice. Please read this important notice of your rights under Section 504.