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| **Section 504 Manifestation Determination/Evaluation** |

*(To be used before any significant change in placement made for disciplinary reasons for a student eligible under a Section 504 Plan.)*

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| **Date of Section 504 Manifestation Determination Meeting** |  |

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| --- | --- | --- | --- |
| **Student:** |  | | |
| **Date of Birth:** |  | **Area of Disability** |  |
| **School:** |  | **Grade:** |  |

Describe the specific misbehavior/actions of the student that are the basis for considering a change in

placement for disciplinary reasons.

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| **Evaluation Data Considered from a Variety of Sources**  The Committee reviewed and carefully considered data gathered from a variety of sources, including  the Referral Document. (Please check each type of data reviewed by the Committee, or attach copies  of the data.) | | | |
| Parent Input |  | Student Work Portfolio |  |
| Teacher/Administrator Input & Recommendations |  | Special Education Records (specify) |  |
| Aptitude and Achievement Tests |  | Social or Cultural Background |  |
| Other Tests |  | Disciplinary Records/Referrals |  |
| Early Intervention Data |  | Adaptive Behavior |  |
| Grade Reports |  | Disciplinary Records/Referrals |  |
| School Health Information |  | Witness Statements |  |
| Medical Evaluation/Diagnoses/Physical Condition |  | Other |  |
| Other |  |  |  |
| NOTE: If information from a conversation or other data in unwritten form was considered, please  document that oral data relied upon by attaching written notes summarizing the conversation.) | | | |
|  | | | |

1. \_\_\_Yes \_\_\_\_ No Was the misconduct caused by, or directly and substantially related to, the

child’s disability?

2. \_\_\_\_Yes \_\_\_\_No Was the misconduct a direct result of the District’s failure to implement the

Section 504 Plan?

***\*If the answer to either of these two questions is YES, then the determination is that the disciplinary behavior is a manifestation of the child’s disability. On the other hand, if the answer to both is NO, then the disciplinary behavior is not a manifestation of the child’s disability.***

\_\_\_ The Section 504 Team has determined that the behavior being considered for disciplinary action ***is not a manifestation of* the student’s mental/physical disability** and the student may be disciplined in the same manner other non-disabled students.

\_\_\_ The Section 504 Team has determined that the behavior being considered for disciplinary action ***is a manifestation of the* student’s mental/physical disability** and, as a result, the student’s behavior will be addressed in the following manner:

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If this student is being referred to a discipline tribunal, please list the charges that will be filed:

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The 504 Committee must address each charge being made and determine the relationship between the student’s disability and each behavioral incident.

**ATTACHMENT: “Parent/Guardian Procedural Safeguards under Section 504 of the**

**Rehabilitation Act of 1973”**

**Signatures below indicate Attendance at the 504 Meeting.**

**Signature Position Date**

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**MEETING MINUTES**

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