

Emery School District  
SECTION 504 Team meeting  
Eligibility summary/accommodation plan

Please submit a copy to the District ADA/504 Compliance Officer

Student: \_\_\_\_\_ Date: \_\_\_\_\_ Grade: \_\_\_\_\_  
Teacher: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Parent: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ School: \_\_\_\_\_  
Case Manager: \_\_\_\_\_

**PARTICIPANTS** – Staff knowledgeable about the student, disability, and the results of the evaluation data.

**SUMMARY OF EVALUATION DATA** – Information from a variety of sources, including, as relevant, aptitude and achievement tests, teacher recommendations, physical conditions, social or cultural background, and adaptive behavior.

**SUMMARY EDUCATIONAL IMPACT** – Specific ways the student’s disability creates a substantial limitation on his learning. (For example: Student misses instruction during seizures. Student is unable to complete assignments in a timely manner due to frequent need of a bathroom break because of an intestinal blockage.)

**DETERMINATION OF WHETHER THE STUDENT HAS A DISABILITY UNDER SECTION 504**

yes no

The student has a physical or mental impairment which substantially limits one or more major life activities, such as caring for one’s self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working.

Disability: \_\_\_\_\_

Does the disability adversely affect the Student’s educational performance?

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Part II  
Student accommodations

\_\_\_\_\_ (student name) will have equal access to the general education curriculum despite health concerns caused by \_\_\_\_\_ (disability) with the following reasonable accommodations/modifications.

Accommodation 1:

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Accommodation 2:

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Accommodation 3:

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Accommodation 4:

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Placement for Services: \_\_\_\_\_

DURATION OF ACCOMMODATION(S) From \_\_\_\_\_ To \_\_\_\_\_

**Participants**

Name	Title	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I give my permission for my child to receive the above mentioned services.

\_\_\_\_\_  
Parent (Guardian)

\_\_\_\_\_  
Date

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