504 ELIGIBILITY DETERMINATION

Student's Name: _____ **Grade**: _____ **Date**: _____

School: _____ **Birth Date**: _____ **Parent(s)**: _____

School Contact Person: _____ **Position**: _____

Eligibility Team Members: (fill in names and check whether knowledgeable about the...)

Name of Team Member	child	meaning of evaluation data	accommodations/ placement options
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Variety of sources of evaluation information: (indicate each one used)

_____ achievement tests
_____ adaptive behavior
_____ medical report
_____ other (specify): _____
_____ teacher recommendations/observations
_____ student work samples
_____ cognitive assessments

1. Specify the mental or physical impairment: _____

2. Check the major life activity that is affected by the impairment:

   seeing hearing caring for one's self breathing
   walking learning performing manual tasks working
   other (specify: _____

   The team must focus on the major life activity as a whole (e.g. learning), not on a particular class (e.g. math) or sub-area (e.g. socialization; study skills).

3. The term "substantially limits" means that the student is:

   a) unable to perform a major life activity that the average student of approximately the same age can perform

   OR

   b) significantly restricted as to the condition, manner or duration under which a particular life activity is performed as compared to the average student of approximately the same age. The impairment must be substantial and somewhat unique, rather than commonplace, when compared to the average student of approximately the same age.

   Discount from the analysis any sub-par performance due to other factors, such as lack of motivation, and the immediate situation or environment. Similarly, make an educated estimate of the mitigation of medication. Use the average student in the general population as the frame of reference for comparison.

Place an "X" on the following scale to indicate the specific degree that the impairment (in #1) limits the major life activity (in #2): For an "X" at 4.0 or above, fill in specific information evaluated by the team that justifies the rating:

5 ---------- Extremely _____
---
4 ---------- Substantially _____
---
3 ---------- Moderately_____
---
2 ---------- Mildly _____
---
1 ---------- Negligibly _____

The team's determination was less than 4.0; the student is not eligible for Section 504 protections. Provide notice to parents of their procedural rights, including an impartial hearing. **OR**

The team's determination was a "4" or above. The team should determine and list on the 504 Accommodation Plan the specific accommodations that are necessary for the student to have an opportunity commensurate with nondisabled students of approximately the same age in this district.