



FORM B SECTION 504 TEACHER INPUT

Dear _____ Subject _____ Date: _____
Teacher Name

A Section 504 meeting is being scheduled for your student: _____
Student Name

Your input is invaluable to the Section 504 team. Please complete this form IN FULL and return to your school site's Section 504 Coordinator by: _____.
Date

You may also be asked to attend the 504 meeting.

Purpose of the 504 meeting:

☐ Initial Evaluation ☐ Re-Evaluation ☐ Annual Review ☐ Other _____

Based on **your knowledge and observation** of the student, please rate this student in the following categories in comparison with the average, same grade level, student at your school:

1-Significantly Below Average

2-Slightly Below Average

3-Average

4-Above Average

N/A: I am not able to rate this student in this category.

Classwork Completion		Homework Completion		Test Taking	
Reading		Math		Written Expression	
Following Oral Directions		Following Written Directions		Behavior/Compliance	
Attention to Task		Organization		Class Participation	
Attendance		Fine Motor Skills (handwriting typing, etc.)		Communication Ability	
Physical Health Needs		Gross Motor Skills (sitting, walking, standing, etc.)		Social Skills/Peer Relationships	

For any 1 or 2 ratings, please add details below to explain your concerns.

For any N/A ratings, please indicate why you are unable to provide information for this category.

Do you have concerns in relation to any activities/categories **not listed** above?

FOR INITIAL EVALUATIONS ONLY:

Do you currently provide any accommodations or supports to this student, **that are not otherwise available to all students in your classroom?**

☐ No ☐ Yes, as follows: _____.

If yes, why?

- ☐ Parent requested, and I agree the Student requires this support/accommodation.
- ☐ Student requested, and I agree the Student requires this support/accommodation.
- ☐ Student or Parent requested, and I agreed temporarily, but do not believe it is necessary long term for Student to have equitable access to the educational environment.
- ☐ Student or Parent did not request, but I implemented because I believe Student requires this support/accommodation for equitable access to the educational environment.

FOR ANNUAL REVIEWS AND RE-EVALUATIONS ONLY:

Are there any changes to Student's 504 Plan and/or Section 504 eligibility status (e.g. a new suspected impairment) that you believe are necessary at this time?