



FORM A SECTION 504 REFERRAL

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination on the basis of disability in any program or activity receiving Federal financial assistance. If you feel a student may have a physical or mental impairment that substantially limits a major life activity, please complete and return this form to your school site Section 504 Coordinator.

Student's Name _____ Date _____

School _____ Grade _____ DOB _____

Referring Party:

☐ Parent ☐ Teacher ☐ School Nurse ☐ School Psychologist ☐ Administrator ☐ Other _____

Describe why you are referring this student for a Section 504 evaluation:

Identified Mental or Physical Impairment(s) or Suspected Impairment(s): _____

Major Life Activities Possibly Impacted: _____

Medical Information: (A formal medical diagnosis is not required for Section 504 referral or eligibility.)

Does the student have any formal medical diagnoses? ☐ Yes ☐ No

If yes: Diagnosis: _____ Diagnosed by: _____ Date: _____

Diagnosis: _____ Diagnosed by: _____ Date: _____

Is the student on any medications? ☐ Yes (list) _____ ☐ No

If yes, what is the positive or negative impact of those medications on the student? _____

Does the student utilize any other mitigating measures other than medication (e.g. behavior contracts, health plans, learned/adaptive behaviors, assistive technology, etc.) that positively impact the student in school? If yes, please list and describe the impact of each mitigating measure.

Other Factors:

Describe any cultural, economic, or environmental factors that may have impacted this student:

******Please attach any and all supporting documentation (medical records, letters, evaluations, etc.)**

Referring Party Name

Signature

Date

For School Site Section 504 Coordinator Completion Only:

Date Referral Received:

District Action:

- ☐ IDEA Disability Suspected—Refer to Special Education Department and Send Notice of Action
- ☐ 504 Disability Suspected—Convene Team to Conduct Review of Existing Data
- ☐ No Disability Suspected---Send Notice of Action and Consider Recommending General Education Interventions