

## PARENT AND STUDENT INVITATION SECTION 504 MEETING

Student Name: \_\_\_\_\_ Student #: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Date: \_\_\_\_\_

To The Parent/Guardian of: \_\_\_\_\_ (Student Name)

You are invited to attend a meeting to discuss your child regarding Section 504. The purpose of this meeting is to:

- Conduct a Section 504 Initial Evaluation for Eligibility Considerations.
- Conduct a Section 504 Periodic Re-Evaluation (at least every three years).
- Develop or Revise a Section 504 Student Accommodation Plan.
- Conduct a Manifestation Determination Review.
- Other \_\_\_\_\_

You are encouraged to attend this meeting. Your knowledge of your child and contributions to our Team are necessary to help us make sound decisions. The meeting will be held at:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

**A group of persons who are knowledgeable about your child and/or the information to be reviewed will be in attendance at the meeting to the greatest extent possible. If one of your child's teachers cannot attend the meeting, information will be gathered prior to the meeting to help us in our decision-making processes.**

If you have any questions, please contact me at \_\_\_\_\_.

\_\_\_\_\_  
Signature of Campus 504 Coordinator

\_\_\_\_\_  
Date

504 Team Members:

\_\_\_\_\_