

**504 PARENT REFERRAL FORM**

Student:	Birth Date:	Grade:
Address:	Date:	Homeroom:
Guardian(s): #1: _____ Relationship to Student: #2: _____ Relationship to Student:	Preferred Phone Number: Preferred E-mail:	Other Preferred Phone #: Other Preferred E-mail:

1. Describe the nature of the handicap and how the child's current academic program discriminates against the student.

2. Describe how the student's handicap affects a major life activity (such as hearing, walking, seeing, speaking, breathing, learning or working). Please attach any supporting documentation.

3. What, if any, specific accommodations are you seeking?

In order to help the Committee evaluate your request, we ask that you return this form with a professional evaluation (medical, if handicapping condition is medically related) to your child's School Counselor.

Professional's Name & Title: _____ Phone Number: _____

Under Section 504 regulations, the district is required to evaluate a student only when it has reason to believe that the child needs Special Education or related services. If the district does not have such a belief, the district is not required to evaluate the student.

Parent(s) Signature: _____

Date: _____

Parental Notice of Rights Regarding Section 504 of the Rehabilitation Act of 1973

Section 504 of the Rehabilitation Act of 1973 prohibits discrimination against individuals with a disability in any program receiving Federal financial assistance. The Act defines a person with a disability as anyone who:

- 1) Has a mental or physical impairment which substantially limits one or more major life activities (caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working);
- 2) Has a record of such impairment; or
- 3) Is regarded as having such an impairment.

Below is a description of the rights granted by federal law to students with disabilities. The intent of the law is to keep you fully informed concerning decisions about your child and to inform you of your rights if you disagree with any of these decisions. You have the right to:

- Have your child with disabilities take part in, and receive benefits from public education programs without discrimination because of her or his disability.
- Have the school district advise you of your rights under this law.
- Receive notice with respect to identification, evaluation, or placement of your child.
- Have your child receive a free and appropriate public education. This includes the right to be educated with a non-disabled student to the maximum extent appropriate. It also includes the right to have the school district make reasonable accommodations to allow your child an equal opportunity to participate in school and school-related activities.
- Have your child educated in facilities and receive services comparable to those provided to non-disabled students.
- Have your child receive special education and/or related services if s/he is found to be eligible under the Individuals with Disabilities Education Act (IDEA) or Section 504 of the Rehabilitation Act.
- Have evaluation, educational and placement decisions made based upon a variety of informational sources; and by a group of persons, including persons who know the student, the evaluation data and the placement options.
- Have transportation provided to and from an alternative placement setting at no greater cost to you than would be incurred if the student were placed in a program operated by the district.
- Have your child be given an equal opportunity to participate in nonacademic and extracurricular activities offered by the district.
- Examine all relevant records relating to decisions regarding your child's identification, evaluation, educational program, and placement.
- Obtain copies of your child's educational records at a reasonable cost unless the fee would effectively deny you access to those records.
- Receive a response from the school district to reasonable requests for explanations and interpretations of your child's records.
- Receive all information in the parent's or guardian's native language primary other mode of communication.
- Right to periodic reevaluation and evaluation before any significant change in placement.
- Request amendment of your child's educational records if there is reasonable cause to believe that they may be inaccurate, misleading, or otherwise in violation of the privacy rights of your child. If the school district refuses this request for amendment, it shall notify you within a reasonable time, and advise you of the right to a hearing.
- Request mediation or an impartial due process hearing related to decisions or actions regarding your child's identification, evaluation, educational program or placement. You and the student may take part in the hearing and have an attorney represent you. Hearing request must be made in writing to:
Dr. Michael Snyder - 504 District Coordinator, Rumson District, 50 Black Point Road, Rumson, NJ 07760
- File a local grievance.
- Right to inspect and review all of your child's educational records, including the right to obtain copies of education records at reasonable cost unless the cost would deny you access to the records, and the right to amend the record if you believe information contained in the record is inaccurate or misleading. If the school district refuses to amend the record, you have a right to request a hearing.
- Right to have educational evaluation and placement decisions made based on information from a variety of sources and by persons who know the needs of the student, meaning of evaluation data and placement options.

RECEIPT FOR PARENTS' AND STUDENT'S RIGHTS UNDER SECTION 504

PARENTAL CONSENT FOR INITIAL SECTION 504 EVALUATION

STUDENT NAME: _____ DOB: _____

SCHOOL: _____ GRADE: _____ HOMEROOM TEACHER: _____

ADDRESS: _____

PARENT(S)/GUARDIAN(S) NAME(S): _____

PHONE NUMBER: _____ E-MAIL: _____

Notice of Parent and Student Rights Under Section 504 of the Rehabilitation Act of 1973 was enclosed for your review. This document is provided to you so that you will be advised of your and your child's rights under Section 504. All of the rights, listed below, are triggered with respect to any actions regarding the identification, evaluation or educational placement of your child under Section 504.

THESE DOCUMENTS DESCRIBE YOUR RIGHTS TO:

1. Notice
2. Review of relevant records
3. An impartial hearing
4. A review procedure with respect to any actions concerning the evaluation, identification or educational placement of your child

Please sign as indicated below to acknowledge that you have received a copy of Parent and Student Rights Under Section 504 and that you give your permission for an initial review. The Section 504 Committee will gather a variety of evaluative data about your child. The review will assess specific areas of your child's educational needs.

I have received a copy of Parents' and Students' Rights Under Section 504 of the Rehabilitation Act of 1973, included in this packet. Please sign and date.

Signature of parent, surrogate parent, guardian or adult student

Date signed: ____/____/____

Signature of interpreter, if used

Date signed: ____/____/____

I grant permission for the school's Intervention and Referral Services Committee (I & RS) to review the Section 504 request for my son or daughter. Please sign and date.

Signature of parent, surrogate parent, guardian or adult student

Date signed: ____/____/____

If you have any questions concerning the information in this document, you may contact the Section 504 District Coordinator, Dr. Michael Snyder at (732) 842-0811.