District Letter Head

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| Section 504 Student File Review  |

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| **Student Information**  |
| **Student Name:**  | **Date of Review:**  |
| **Date of Birth:** | **District ID:** | **Grade:** |
| **Attending District:**  | **Attending School:**  |
| **504 Case Manager:** | **Case Manager Contact:**  |

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| **Current Concerns** |
| Check all that apply |
| 🞎 Physical health condition/diagnosis🞎 Physical impairment🞎 Mental health condition/diagnosis🞎 Mental impairment | 🞎 Chronic absenteeism🞎 Chronic behavior incidences🞎 Learning disorder🞎 Other: |
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| **Academic Achievement** |
| Patterns in progress reports and grades |
| Patterns in benchmark tests and progress monitoring |
| Patterns in state or standardized test results |
| History of and/or current academic interventions |
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| **Attendance** |
| Patterns in attendance including excused absences, unexcused absences, and days late to school |
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| **Behavior and Discipline** |
| Patterns of behavior incidences |
| History of suspension, expulsion, and school exclusion |
| Previous or existing functional behavior assessments, behavior intervention plans, or behavior interventions |

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| **Previous Assessments** |
| Results of previous special education evaluation(s) |
| Results of hearing screening |
| Results of vision screening |
| Results of any other comprehensive education or psychological evaluation |

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| **Health Conditions** |
| Documentation of health or mental health conditions |
| Previous or current individualized health plan, other health service plan, or involvement of the school nurse |
| Record of medication  |
| Patterns of health room log |
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| **Other information** |
| Student is currently: | Student was previously: |
| 🞎 LEP and receiving ELD (ESL) services🞎 Gifted (TAG, GATE)🞎 Eligible under Section 504  | 🞎 LEP and received ELD (ESL) services🞎 Eligible under IDEA and had an IEP🞎 Eligible under Section 504 |
| Other notable information from student file |
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| **Person Conducting File Review** |
| Name | Position |