

Section 504 Manifestation Determination Evaluation

Procedural Checklist:						
Both boxes must be checked before the §504 evaluation for manifestation determination can occur.						
Verify how the parent was informed of the date, time, and place for this evaluation						
	in writing		by phone		in person	Other?
Verify that the §504 Committee is a group, including a person with knowledge in each of the required areas. (See below)						

Student:	Student ID #:
Campus:	Date of Evaluation:

§504 Committee Membership:		
By regulation, the Section 504 Committee is a group of knowledgeable people. Within the group, each required type of knowledge must be present. List each member attending and check the area of knowledge each provides (attach an additional sheet if necessary). Each required area of knowledge must be present on the committee.		
Name	Position/Title	Knowledge of
		<input type="checkbox"/> The Child
		<input type="checkbox"/> The meaning of the evaluation data
		<input type="checkbox"/> The placement options
		<input type="checkbox"/> The Child
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		<input type="checkbox"/> The placement options

Evaluation Data Considered from a Variety of Sources		
The Committee reviewed and carefully considered data gathered from a variety of sources, including the Referral Document. [Please check each type of data reviewed by the Committee, or attach copies of the data.]		
Parent input	Student work portfolio	
Teacher/Administrator Input & Recommendations	Special education records (specify)	
Aptitude and Achievement Tests	Social or cultural background	
Other Tests	Disciplinary records/referrals	
Early Intervention data	Mitigating measures	
Grade reports	Adaptive behavior	
School Health Information	Disciplinary Records/referrals	
Medical evaluations/diagnoses/physical condition	Witness statements	
Other	Other	
NOTE: If information from a conversation or other data in unwritten form was considered, please document that oral data relied upon by attaching written notes summarizing the conversation or data.)		

Behavior subject to disciplinary action (The 504 Committee does not address whether or not the alleged behavior occurred):			
List each of the student’s physical or mental impairments:			
The Section 504 Committee reviewed and discussed the data listed above. Based on this review, the Committee has made the following determinations:			
Question #1: Was the conduct in question caused by, or directly and substantially related to the student’s disabilities?	Yes	No	
Question #2: Was the conduct in question the direct result of the school’s failure to implement the student’s Section 504 plan, if there was any such failure?	Yes	No	
Analyzing the Results: If either of the questions are answered “yes,” the behavior must be considered to be a manifestation of the student’s disability. In that event, the student cannot be expelled or placed in the school’s disciplinary alternative education setting (DAEP) for more than 10 school days.			
Note: Regardless of the result of the manifestation determination, the parents and school can agree on a disciplinary placement. The parents’ agreement must be informed, voluntary, and not coerced.			

Committee Notes:

Notice of Section 504 Manifestation Determination Evaluation Results

[Use this form to ensure that parents are provided with notice of the results of the manifestation determination evaluation meeting. Attach the completed manifestation determination Form together with the §504 Services Plan (Form 13) if the student had a Plan and if the Plan was changed]

Date

Dear Parent/Guardian/Adult Student,

This letter is to inform you that the Section 504 Committee had a meeting on _____ to discuss your Student _____ (student's name). A copy of the manifestation determination evaluation form is attached. After careful review of relevant evaluation data indicated on page 1, the Section 504 Committee analyzed the data to answer the manifestation determination questions on page 2. While the evaluation document provides more detail on the Committee's decision, by way of summary, the Committee determined that _____
_____ (provide brief summary of decision)

A copy of the 504 Committee's manifestation determination evaluation is enclosed. If your student's Section 504 plan was changed during the meeting, a copy of the new §504 Plan is also attached.

If you have any questions concerning this decision, please call me at _____.

I will be more than happy to discuss any questions that you may have.

Sincerely,

Section 504 Coordinator

- Encl. (1) Completed Manifestation Determination Evaluation Form
(2) §504 Services Plan (if the student had a Plan and if the Plan was changed)