

APPENDIX L

504 Eligibility Determination

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Parent(s): \_\_\_\_\_

School Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Eligibility Team Members: (fill in names and check whether knowledgeable about the...)

	child	meaning of evaluation data	accommodations/ placement options
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Variety of sources of evaluation information: (indicate each one used)

_____	achievement tests	_____	teacher recommendations/observations
_____	adaptive behavior	_____	student work samples
_____	medical report	_____	cognitive assessments
_____	other (specify): _____		

1. Specify the mental or physical impairment: \_\_\_\_\_

2. Check the major life activity that is affected by the impairment:

<input type="checkbox"/> seeing	<input type="checkbox"/> hearing	<input type="checkbox"/> caring for one's self	<input type="checkbox"/> breathing
<input type="checkbox"/> walking	<input type="checkbox"/> learning	<input type="checkbox"/> performing manual tasks	<input type="checkbox"/> working
<input type="checkbox"/> other (specify): _____			

3. The term "substantially limits" means that the student is:

a) unable to perform a major life activity that the average student of approximately the same age can perform  
**QR**

b) significantly restricted as to the condition, manner or duration under which a particular life activity is performed as compared to the average student of approximately the same age. The impairment must be substantial and somewhat unique, rather than commonplace, when compared to the average student of approximately the same age.

Place an "X" on the following scale to indicate the specific degree that the impairment (in #1) limits the major life activity (in #2): For an "X" at "4" or above, fill in specific information evaluated by the team that justifies the rating:

5	Extremely	_____
4	Substantially	_____
3	Moderately	_____
2	Mildly	_____
1	Negligibly	_____

- The team's determination was less than "4"; the student is not eligible for Section 504 protections. Provide notice to parents of their procedural rights, including an impartial hearing.  
**QR**
- The team's determination was a "4" or above. The team should determine and list on the 504 Accommodation Plan the specific accommodations that are necessary for the student to have an opportunity commensurate with non-disabled students of approximately the same age in this district.

c: Student's Cumulative Folder  
District 504 Coordinator  
Parent

# IDEA/504 FLOW CHART

