

**Tuscaloosa County School System
Section 504 of the Rehabilitation Act**

**Notice and Consent for Section 504 Evaluation/Reevaluation
FORM D**

Date Sent:	Student's Name:
School:	Grade:
Parent/Guardian:	

Your child, _____, has been referred for evaluation to determine if he/she is eligible to receive reasonable accommodations and/or related services.

Your child, _____, has been referred for reevaluation to determine if he/she continues to be eligible to receive reasonable accommodations and/or related services.

Additional information is necessary to determine your child's educational needs and whether he/she might be eligible for assistance under Section 504.

In many cases, the Section 504 evaluation may simply consist of the Section 504 Committee reviewing and interpreting existing school records, including anecdotal evidence, observations, prior testing, grades, standardized test scores, and other data in order to determine if your child qualifies for accommodations in the regular classroom. In addition to reviewing the data described above, the District desires to conduct the following assessments:

<input type="checkbox"/> Vision	<input type="checkbox"/> Behavior
<input type="checkbox"/> Hearing	<input type="checkbox"/> Classroom Performance
<input type="checkbox"/> Academic Achievement	
<input type="checkbox"/> Other:	

Please review the enclosed document entitled "Notice of Parent Rights," which informs you of your rights under Section 504. If you CONSENT to the evaluation, please check the "consent" statement, sign and return one copy of this letter. If you REFUSE consent, please check the "refuse consent" statement, sign and return one copy of this letter. Keep the other copy of this letter and the Notice of Parent Rights for future reference.

Please call _____, Section 504 Coordinator, at _____ if you have any questions.

As the parent/legal guardian of the above referenced student, I have received notice of my Section 504 parent rights, and I understand that this is *not* an offer of a Special Education evaluation.

_____ I hereby CONSENT to an evaluation under Section 504.

_____ I hereby REFUSE CONSENT to an evaluation under Section 504.

Parent/Guardian Signature

Date