



Baldwin County Public School System
Section 504 of the Rehabilitation Act

Notice and Consent for Initial Section 504 Evaluation/Re-Evaluation

Student's Name:		Birthdate:	
Date Sent:	School:		Grade:
Parent/Guardian:			
Address:			
Home Phone:		Cell:	Work:

We have carefully reviewed your child's school records and information received from his/her teachers. Additional information is necessary to determine your child's education needs and whether he/she might be eligible for assistance in the regular classroom under Section 504. We ask that you consent to an evaluation under Section 504 for the following reasons: _____

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. For students who have been involved in the early intervention process, the Section 504 evaluation will include a review of the classroom assistance and interventions provided, the results of those efforts, and any other data generated by that process. In addition to reviewing the data described above, the Baldwin County Public School System desires to conduct the following assessments:

Please review the enclosed document entitled Notice of Parents 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 Parents Rights for future reference.

Please call _____, Section 504 Coordinator, 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

Parent/Guardian Printed Name

Date