



This document is only meant to serve as an example for parents. Parents should check with their local school district for the template their school district uses.

Sample Section 504 Accommodation Plan

Date of Accommodation Plan: _____ Date of Birth: _____

Name of Student: _____

Address: _____

Parent(s)/Guardian(s) Name(s): _____

School: _____ Grade: _____

SUMMARY OF MEETING TO DISCUSS STUDENT'S HANDICAP ACCOMMODATION(S)

Meeting Date: _____ Date(s) of any evaluation(s): _____

Meeting Participants: _____

Student's Identified Disability: _____

How does the handicap affect one or more of the student's life activities in and around school?

Accommodations to be provided:

Signature of Parent _____ Date _____

Signature of ADA Coordinator _____ Date _____

Note: If the Parent(s), Guardian(s) or Student (18 years or older) disagrees with the identification of the student's handicap, the evaluative data, or the accommodations to be provided, a grievance may be filed in conformance with the District Grievance Procedure.