

Section 504 Policies and Procedures

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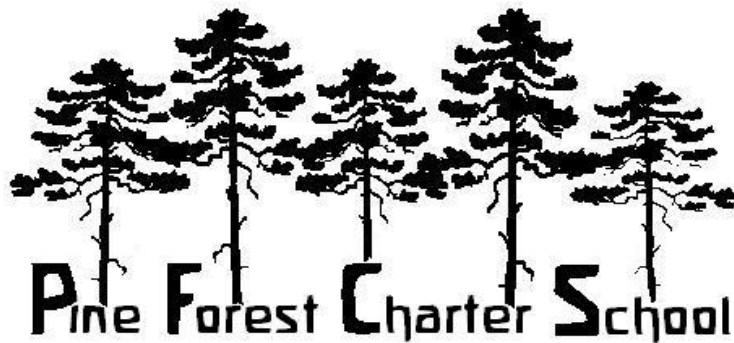
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**An Arizona Charter School Guided by the Core Principles of
Public Waldorf Education**

Established in 1995

2257 E. Cedar Ave., Flagstaff, AZ 86004, 928-779-9880, Fax 928-779-9792

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Section (§) 504

§504 is part of the Rehabilitation Act of 1973. It is a federal civil rights law protecting the rights of individuals with disabilities.

§504 says programs that get federal money cannot discriminate against people with a disability in employment practices, program accessibility, education, and health, welfare, and social services.

§504 says an individual with a disability is anyone who:

1. Has a mental or physical impairment which substantially limits one or more major life activities such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working; **or**
2. Has a record of such an impairment; **or**
3. Is regarded as having such an impairment.

Section 504 regulations require Pine Forest Charter School (**PFCS**) to provide a free appropriate public education (FAPE) to eligible students. FAPE includes the right to be educated with other students in the least restrictive environment. It also includes the provision of accommodations that allow eligible students an equal opportunity to participate in school and school related activities.

How is §504 different from the Individuals with Disabilities Education Act (IDEA)?

IDEA covers **only** 13 disabilities and **only if** the student needs specially designed instruction in order to benefit appropriately from their education.

The 13 disabilities covered by IDEA are:

- Autism
- Deaf-blindness
- Deafness
- Emotional disturbance
- Hearing impairment
- Mental retardation
- Multiple disabilities
- Orthopedic impairment
- Other health impairment
- Specific learning disability

- Speech or language impairment
- Traumatic brain injury
- Visual impairment (including blindness)

§504 covers **ALL** mental or physical impairments (including emotional and behavioral problems) **IF** substantially limits one or more major life activities.

Some of the conditions that may qualify a student §504 are attention deficit disorders, allergies, asthma, diabetes, emotional adjustment disorders, behavior disorders, orthopedic problems, hearing and vision impairments, certain communicable diseases such as HIV/AIDS or tuberculosis, and temporary medical conditions due to illness or accident.

All the protections of §504 apply to all 504 students **AND** all IDEA students. That is, §504 has a much broader definition of disability than the one IDEA uses. However, IDEA only covers IDEA students. (See **Student Population Chart and IDEA/§504 Flow Chart** on next 2 pages for more explanation). IDEA is a **special** education program. §504 is a **general** education program.

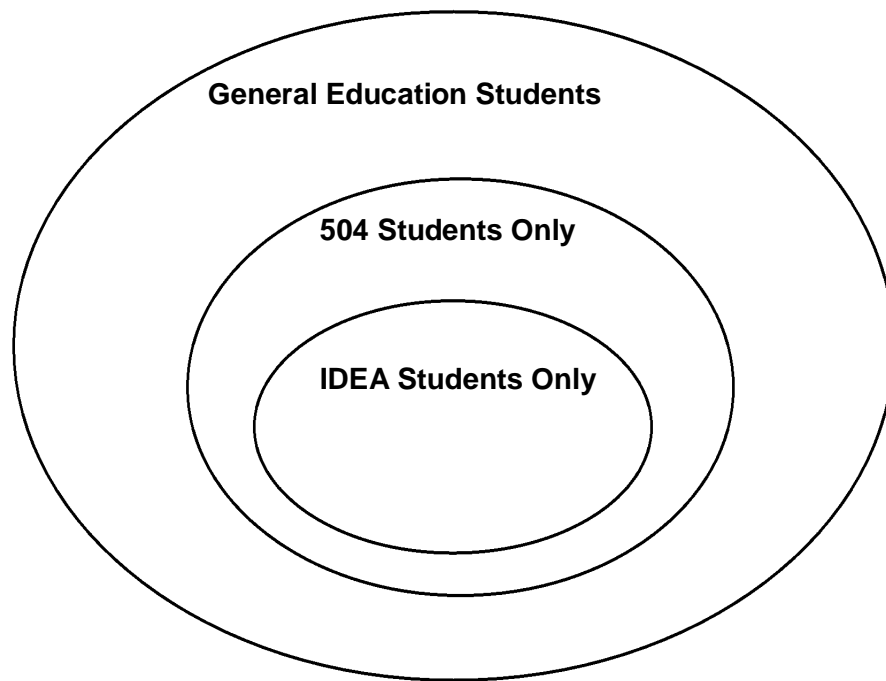
§504 or IDEA?

If a student has one of the 13 disabilities covered by IDEA, they should be referred for IDEA evaluation. Schools must comply with the requirements in Section 504 to future receipt of federal funds.

Students who have §504 may need accommodations and related services even though specially designed instruction (special education) is not needed to receive FAPE. Those s have a §504 Accommodation Plan that says what services and supports they will get.

Just as for IDEA students, §504 students must receive a free, appropriate public education (FAPE). This means their education must be provided at no cost to the parents and must meet the student's needs. Any specific questions regarding IDEA should be directed to the **PFCS** Director of Special Education Services.

Student Population



IDEA/§504 Students

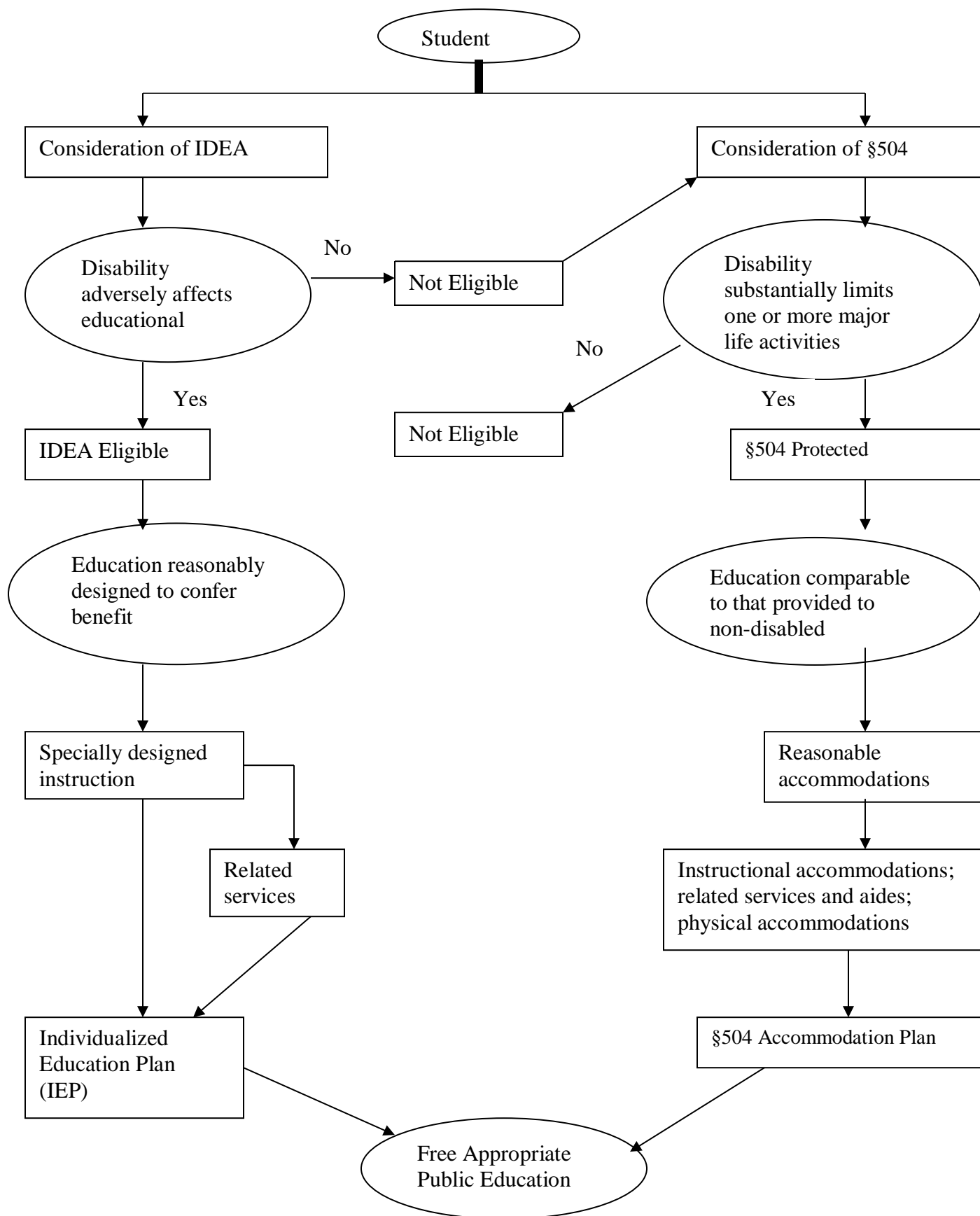
Students are qualified under one of more of 13 IDEA disabling conditions. Specially designed individual education programs are planned for each student by IEP Teams.

§504 Students Only

mental or physical impairment that substantially one or more of the student's major life activities, accommodations to the student's education program are required. A §504 Accommodation Plan is designed for each student according to the individual need. Examples of potential §504 disabling conditions not typically covered under IDEA are:

- Communicable diseases, such as HIV/AIDS, tuberculosis
- Medical conditions, such as asthma, diabetes, allergies
- Temporary medical conditions due to accident or illness
- Attention Deficit Disorder
- Other conditions

IDEA/§504 Flow Chart



Process

Child Find Requirements

PFCS is required to identify and locate every qualified child residing in its boundaries who has a disability and notify their parents of the School's duty to provide a free appropriate public education. This is known as Child Find. As part of Child Find, **Pine Forest Charter School** annually publishes the Child Find Notice in local newspapers and student handbooks and places the Annual Notice in locations likely to be seen by parents of eligible students (such as supermarkets, pediatrician's offices, etc.)

Student Study Team – SST (Pre-Referral Interventions)

The team can bypass the SST process and determine if child needs a 504 . Teachers may refer students who are struggling academically to the Student Study Team (SST). To refer a student to SST, use the forms provided for that purpose. Indicate on those forms whether the problem is related to depression, speech, fine/gross motor, behavior or academic concerns. SST referrals should also include documentation of what has been done in the general education classroom.

If the SST process indicates that the student may have a disability, s/he may be referred for evaluation for special education or §504 to resolve the problems.

§504 Process

1. If you think a student needs §504 accommodations

Any parent, guardian, teacher, counselor or other school staff member who believes a student may need a Section 504 accommodation can request an evaluation for §504 eligibility. A student may also be referred for §504 evaluation by the SST team following the completion of pre-referral interventions. If a request for §504 services or evaluation is brought to your attention, send a referral to your school's §504 Coordinator. Use the **Referral for §504 Determination of Eligibility** form (Attachment A).

Things to look out for or circumstances:

- S/he is returning from a medical, rehabilitation or psychiatric facility (except for short-term medical problems).
- S/he is taking prescription medication at school.
- S/he needs specialized medical procedures or equipment at school.
- Any academic and /or behavioral concerns.
- S/he is evaluated for IDEA and has an identified disability, but does not qualify for special education, or is dismissed from needing special education services. Such a student may be eligible for §504 services, but it is not automatic.
- S/he is diagnosed as an addict but is not currently using drugs or alcohol (e.g., has been in a drug rehabilitation program and is no longer using drugs). A person who is **currently** using illegal drugs can't get §504 services.
- Has any other physical or mental impairment that places a substantial limitation on one or more major life activities.

2. Referral and Evaluation

If school personnel have reason to believe that a student has a disability, the student must be evaluated. The parent may also request an evaluation. Parental consent is highly encouraged and best practice. Use the **Permission for Initial Assessment under Section 504** form (Attachment B). Also send a copy of **Section 504/ADA Notice of Rights** (Attachments D & E).

A student's §504 eligibility is based on the determination of whether or not the student has a physical or mental that substantially limits major life activity, has a record of such an impairment, or is regarded as having such an impairment.

§504 Multidisciplinary Team

The decision to qualify a student for §504 services is made by a multidisciplinary team of people, composed of at least three members. It should include persons knowledgeable about the student, the meaning of evaluation data, and educational interventions. The §504 Multidisciplinary Team may include persons such as the student's teacher, school psychologist, guidance counselor, school nurse, and school

administrator. The parent should be invited to participate with the team in the §504 process of determining eligibility and services. The §504 Multidisciplinary Team should be chaired by a person appointed by the school principal, preferably the §504 Coordinator.

Evaluations under Section 504 are not limited to formal evaluation instruments. Because the disabilities that may fall under Section 504 are broader than the specific disabilities listed in IDEA, evaluative information for a student may come from a number of sources, including aptitude and achievement tests, teacher recommendations, the student's physical condition (as attested to by the student's physician), the student's social or cultural background. Section 504's implementing regulations note that any evaluation of a student must consider all significant factors relating to the student's learning process. Thus, evaluations must be based on the type of disability suspected and the kind of services needed. In some cases, the evaluation is done by the §504 Multidisciplinary Team. The team can look at existing evaluation data, review school records, obtain observation data, evaluate effectiveness of educational interventions over time, determine eligibility under §504, and recommend programming within general education.

3. Notice of Meeting

Section 504 does not require parents to be members of the Section 504 Team. However, parents should be invited to be part of the §504 Multidisciplinary Team and notified of all meetings regarding their child. Use the **Notice of Section 504 Meeting** (Attachment F).

4. If a student is eligible

The §504 Multidisciplinary Team documents their decision on the **Eligibility Determination for §504/ADA** (Attachment G). If the student is **NOT** eligible for §504 protections, use the **Notice of Section 504 Ineligibility** (Attachment H). When giving this to parents, include a copy of the **Section 504/ADA Notice of Rights** (Attachment D & E). This will give them information on how to appeal if they disagree with the §504 Multidisciplinary Team's decision.

5. Section 504 Accommodation Plan

The §504 Multidisciplinary Team also determines what educational services are needed. In addition to the normal and usual academic and school activities, students must also be given the opportunity to participate in non-academic and extracurricular services and activities, such as recreational and athletic activities, and school-sponsored clubs, events and activities. Participation in such non-academic activities may require accommodations.

The accommodations for the student should be documented on the **Section 504/ADA Accommodation Plan** (Attachment I). All of the professional staff that work with the student must be provided a copy of the student's Section 504 plan. Use the **Receipt for Accommodations** Form (Attachment J). Paraprofessional staff that work with the student should also be thoroughly familiar with any accommodations that the student requires to receive an appropriate education.

Monitoring of the plan should be done every twelve weeks (each trimester) as 504 progress reports to parents. Use the **Section 504 Monitoring Plan** (Attachment K) and the **504 Student Trimester Success Checklist** form (Attachment L).

6. Annual Review

Pine Forest Charter School requires that each student's §504 Accommodation Plan (Attachment I) be reviewed at least annually and at any major change of placement to determine if the plan continues to be appropriate for the student, or must be revised to make it appropriate. Use Attachments D, E, F, I, K, L, and, if appropriate, G or H for this purpose. Follow meeting notice and meeting procedures listed in sections 3-5 on page 5 of this manual.

7. Reevaluation

Before any change in placement, including long-term suspensions and expulsions, a reevaluation must be done along with notice to parents. A reevaluation of the student's disability status must also be conducted every three years or more often, if needed. Use the procedures noted above in sections 2-4 to accomplish reevaluations.

Confidentiality of Student Records

Student Records: Parents or guardians have the right to examine all educational records of the student, including the student's §504 records. In general, only those persons with a legitimate educational interest, or "need to know," have access to confidential information concerning the student's disability and education.

§504 Student File: The school will maintain a confidential §504 documentation file for each student referred to the §504 Multidisciplinary Team. The confidential records of each student will be housed at the school with their cumulative file. When a student transfers out of the school, the §504 file may be transferred with parent permission or proper notification under FERPA requirements.

§504 Census Roster: Each school will maintain a §504 census roster, and will forward the list of §504 students receiving services and a copy of their accommodation plan to the §504 Coordinator each semester.

Notice

Parents will be provided written notice of the actions of the §504 Multidisciplinary Team with respect to the identification, evaluation and education placement of their child. Use the **Section 504 Meeting Notice** (Attachment E), and include a copy of **Section 504/ADA Notice of Rights** (Attachment D & E).

Evaluation

An evaluation must be done before initial placement, provision of accommodations, and before any significant change in placement including certain disciplinary removals. Under §504, the evaluation is left to the judgment of the §504 Multidisciplinary Team.

The school must ensure that any formal tests or other evaluation instruments administered:

- Are selected and administered so as to not be discriminatory on a racial or cultural basis;
- Will be supplemented by information from sources other than just formal, validated testing;

- Are provided and administered in the student's native language or other mode of communication and in the form most likely to yield accurate information on what the student knows and can do academically. Developmentally, and functionally, unless it is clearly not feasible to so provide or administer;
- Are used for the purposes for which the assessment or measures are valid and reliable;
- Are administered by trained and knowledgeable personnel; and
- Are administered in accordance with any instructions provided by the producer of the assessments;
- Must be tailored to assess the specific area of educational need and not merely be those which are designed to provide a single score;
- Must be selected and administered to ensure that the student's area of suspected or presumed disability is appropriately assessed; and
- Must not reflect a student's impaired sensory, manual, or speaking skills except where those skills are the factors that the test purports to measure.

Procedural Safeguards/ Due Process

Other Safeguards

If the parents of a student disagree with any actions of the §504 Multidisciplinary Team regarding the identification, evaluation, and educational placement of a student, the parents have a right to an impartial hearing. They may be represented by counsel at this hearing. See the sections of this manual entitled **Due Process Hearing Procedures, Parent Rights** (Attachment D), and **504 Grievance Procedures** (Attachment E) for further information on this topic and procedures to be followed.

Discipline

Discipline of IDEA is the same as 504.

If a student is being suspended for more than 10 days in a school year, the §504 Multidisciplinary Team must determine if the behavior that violated the school discipline code is related to the disability. This includes any accumulation of off-campus suspension days that exceeds 10 in one school year, long-term suspension, expulsion, and suspension or expulsion from a school bus (if that suspension results in the student missing school that day). **Pine Forest Charter School** chooses to use a process known as "manifestation determination." Use the **Manifestation Determination** form (Attachment L) to document this decision.

If the team determines that the behavior was caused by the disability, the Team should review the student's Accommodation Plan, Behavior Plan, and placement to determine if they were appropriate and were being implemented as written. If they are no longer appropriate, some or all of these documents must be revised to insure that they remain appropriate to the student's needs. If they were not implemented appropriately, this must be corrected immediately. The Team may also want to consider if any other changes need to be made to better meet the needs of the student. It is also important for the Team to decide if the student needs a **Functional Behavior Assessment** or a **Behavior Plan**, if one is not already in place.

Pine Forest Charter School may discipline a student with a disability under §504 who is currently using illegal drugs or alcohol to the same extent as action taken against non-disabled students as long as the disability is not related to alcoholism or drug-addiction. In such cases, §504 due process procedures, namely evaluation and manifestation determination, are not required.

Special procedures also apply in the discipline of students with disabilities for possession of firearms.

When the discipline consequences that a student is to receive would constitute a "change of placement" (i.e., off-campus suspensions totaling more than 10 days in one school year, long-term suspension, or expulsion), whether or not a manifestation determination is conducted, the §504 Multidisciplinary Team is required to conduct an evaluation of the student's needs and the appropriateness of his current accommodation plan. In most cases, this will be accomplished by the plan review process described above in this section.

Pine Forest School §504 Position Responsibilities

1. §504 School Coordinator

1. Develop a schoolwide §504 compliance plan.
2. Give each school building the compliance plan and 504 procedures
3. Train school building §504 coordinators in §504 compliance/procedures
4. Develop, implement and disseminate a detailing of procedural safeguards.
5. Work in partnership with the **PFCS** Director of Special Education Services.
6. Communicate schoolwide procedures to staff and parents.
7. Continually seek new information relative to §504 compliance and provide updates to staff as appropriate.
8. Act as §504 Compliance Officer for the School.
9. Serve as **PFCS** liaison with the U.S. Department of Education's Office of Civil Rights (OCR). Investigate OCR complaints in the School and respond to OCR as the School's representative in such matters.
10. Act in accordance with the **PFCS** §504 Grievance Procedures to resolve complaints.
11. Allocate public resources with respect to the funding of §504 services and training.
12. Receives initial and post- referral information.
13. Responsible for gathering any additional and necessary evaluation data.
14. Responsible for notifying all §504 Multi-disciplinary Team members of meetings.
15. Obtain written permission for initial assessment.
16. Responsible for sending notices to parents and scheduling §504 meet
17. Ensures that annual review meetings are conducted at appropriate times.
18. Submits reports (updates of accommodation plans, student §504 census lists, etc.) throughout the year.

1. §504 Monitor

1. Attends all §504 meetings on his/her students.
2. Ensures that parents are provided with a copy of **PFCS** §504 Parental Rights and Grievance Procedures.
3. Ensures the implementation of the §504 Plan by monitoring the plan (Attachment I) every 12 weeks (Attachment L) and by keeping a written record of such monitoring (Attachment M).

Note: §504 monitor and the §504 Coordinator may be the same person, but they do not have to be.

Due Process Hearing Procedures

§504 requires that schools have a procedure for conducting impartial hearings with opportunity for participation by the student's parents or guardian and representation by counsel. Either the parent or the school may request a hearing.

A due process hearing is a legal procedure, which is conducted by an Impartial Hearing Officer (IHO). This method of resolving disagreement is usually sought after formal complaint processes and mediation have failed to resolve disputes.

Parents requesting a hearing should submit a written request to the **PFCS** §504 Coordinator and include the following information:

- The reason for the request
- A suitable time for the hearing
- Two possible dates for the hearing
- Whether the hearing will be closed or open to the public.

The hearing officer must conduct the due process hearing and render a decision no more than 45 days from the date that the school received the parent's request for the hearing. The Impartial Hearing Officer may grant a continuance at the request of one of the parties, if the both parties agree.

Reasons to Request a Hearing

- Disabled a student who is denied identification, evaluation or educational placement.
- Denied appropriate access to educational facilities and programs due to a disability.
- Denied accommodations in general education program because of an identified disability.
- Denied participation in or access to extracurricular and nonacademic activities because of a disability.

PFCS Responsibilities

- **PFCS** will provide a location for the hearing.
- **PFCS** will pay the cost of the Impartial Hearing Officer. At parent request, **PFCS** will provide the parents with a copy of the audio recording of the hearing at no cost to them.
- **PFCS** will allow the child to remain in his/her current placement until after the hearing, unless the parents agree that a change in placement would be best for the child.
- **PFCS** must inform the parents of any free or low-cost legal services or other relevant services available in the area.

Before The Hearing

- At least 5 days before the hearing, **PFCS** and the parents will give each other all exhibits to be presented at the hearing and witness lists, or as determined by the Hearing Officer.
- **PFCS** must allow the parents to examine the child's records and make copies if requested.

During The Hearing

- Parents and **PFCS** may be represented by legal counsel or some other professional who may be knowledgeable about the child (if allowed by the Hearing Officer).
- **PFCS** and the parents may present evidence, and question and cross-examine witnesses who know about the child's disability.
- The child may be present at the hearing.
- After the Impartial Hearing Officer has heard the case, s/he will give a written decision.

- The Impartial Hearing Officer is impartial, and is not an employee of the School. S/he will be well trained and understand what the law requires for children with special needs.

After The Hearing

- The parents will, upon request, receive an audio recording of all that was said at the hearing at no cost to them.
- A copy of the Impartial Hearing Officer's decision will be given to both **PFCS** and the parents. The Hearing Officer must render a decision within 45 days after the school's receipt of the request for a §504 Due Process Hearing. This can only be delayed if the school and the parents agree to the delay or the Impartial Hearing Officer has granted a continuance at the request of one of the parties.
- The decision made by the Impartial Hearing Officer is final unless the parents or **PFCS** appeal the decision to the appropriate state or federal court.



Attachment A

Referral for §504 Determination of Eligibility

Student Name (Last, first, middle)

Date of Birth

Gender

Grade

ID Number: _____

Name of Father/Guardian

Home phone#

Work phone #

Name of Mother/Guardian

Home phone#

Work phone #

Home address

City

State

Zip Code

If parents are divorced or deceased, who has legal rights in regard to child's education? _____

Attach copies of any documentation.

Has the student ever received §504, Special Education, SST, or ELL services, either now or in the past)? ☐ YES ☐ NO

Have any of the following been completed?

☐ Screening ☐ Comprehensive Evaluation ☐ Special Education Services ☐ 504 Plan ☐ ELL Testing

Check Major Life Activity Areas of Concern (attach documentation):

☐ Caring for Self ☐ Performing Manual Tasks ☐ Walking ☐ Seeing ☐ Hearing

☐ Speaking ☐ Breathing ☐ Learning-Reading ☐ Learning-Writing ☐ Learning-Math

☐ Learning-Other _____ ☐ Working

☐ Other (specify): _____

Please specify the nature of the suspected disability: _____

School Name

Person Making the Referral



Permission for Initial Assessment under Section 504

Student's Name _____ Date of Birth _____

School _____ Grade _____ Date _____

Dear Parent/Guardian:

We are asking for your written permission to test your child. This will help the school plan a more effective education for your child. We will give you the results of the assessment when it is finished. Then we will decide if your child is eligible for §504 accommodations. You have the right to approve the assessment or refuse to accept it. You have a right to know and understand what areas will be tested.

Checked (✓) below are the areas where we will do testing:

1. ☐ Academic Skills Specify: ☐ Reading skills (word recognition, comprehension)
☐ Written expression/Spelling
☐ Math computation/concepts
☐ Other: (_____)
2. ☐ Observe Classroom Behavior
3. ☐ Assess adaptive behavior (use of behavior rating scales)
4. ☐ Language Development
5. ☐ Physical Development or Physical Disability-Medical Issues/Allergies, etc.
6. ☐ Hearing/Vision Screening
7. ☐ Social/Emotional
8. ☐ Other: _____

When the testing is completed, we will contact you to discuss the results, what it means and to plan further for your child. Thank you for your cooperation and prompt reply. Questions? Contact the following person at your child's school:

_____	_____	<u>§504 School Coordinator</u>
Name of Person	Phone #	Title

We have enclosed a copy of Parent Rights and the **PFCS** §504 Grievance Procedure. These tell you your rights under §504. Please mark (x) one of the boxes below, sign your name and return this to your child's school.

☐ I **give** permission for the school to test my child in the areas checked above.

☐ I do **not** give permission for the school to test my child.

Date_____
Signature of Parent or Guardian



PARENT AUTHORIZATION FOR RELEASE OF INFORMATION

School: _____

Address: _____

504 Coordinator: _____

Phone: _____ : Fax: _____

Date _____

I hereby authorize: _____ to release to: _____
(Physician name) (Home school)

- ☐ Psychological Evaluation
- ☐ Medical Summary
- ☐ Speech & Language Evaluation
- ☐ Audiological Evaluation
- ☐ Occupational Therapy, ADPE
Physical Therapy Evaluations
- ☐ Pertinent Educational Records

- ☐ Developmental History
- ☐ Individual Education Plans (IEP)
- ☐ Progress Reports
- ☐ Consultant's Reports
- ☐ Vocational Assessment Report and
IVEP
- ☐ Other: _____

Information on _____
(Name) (Birth date)

(Home school)

which may be of value in formulating the best plan for the education of my child.

This information is for the confidential use of the school personnel who are directly concerned with helping this student. **PFCS** policies regarding confidentiality conform with the Family Education Rights and Privacy Act (FERPA) of 1974.

Signature

Relationship to Child

Address

Phone

City State Zip Code



Parent Rights

Section (§) 504 says schools must give students with disabilities the same educational benefits and opportunities as those given to non-disabled students. Under §504 students and their parents have the following rights:

1. **Pine Forest Charter School** must give you a written copy of your rights and of the school's §504 Grievance Procedure. If you need to know more about your rights or the school's §504 procedures, ask your School §504 Coordinator.
2. Your child has the right to an appropriate education designed to meet his/her educational needs as well as the needs of non-disabled students are met.
3. Your child has the right to free educational services except for costs that must be paid by all students.
4. Your child has the right to be educated with children who are not disabled. Your child will be in the general education class, unless his/her educational needs cannot be met even with the use of supplementary aids and services.
5. Your child has the right to services, facilities and activities comparable to those provided to students without disabilities.
6. **PFCS** must evaluate your child before deciding placement or services under §504. Your child may be evaluated again each time **PFCS** wants to change the placement, but this is not required. For a student transferring to **PFCS**, a current 504 plan will be implemented until a new 504 is created.
7. **PFCS** will use information from a variety of sources to make decisions about your child.
8. Placement regarding your child must be made by the §504 Multidisciplinary Team. You may be a part of this Multidisciplinary Team.
9. Students receiving §504 services will have their §504 plan reviewed periodically, which will be annually and may be reevaluated at least every three years.
10. **PFCS** will request written permission from the parent/guardian before doing an initial assessment.
11. You have the right to request an impartial due process hearing if you disagree with **PFCS** about your child's identification, evaluation, or placement under §504. You have the right to participate personally at the hearing, and to hire a lawyer, if you wish.
12. If you want a due process hearing, you must submit your request in writing to the School §504 Coordinator at 928-779-9880, **Pine Forest Charter School, 2257 E. Cedar Ave., Flagstaff, AZ 86004**. A date will be set for the hearing and an impartial hearing officer will be appointed. You will be told in writing of the hearing date, time, and place.
13. If you disagree with the decision of the hearing officer, you have the right to have the closest federal School court review that decision.
14. If you disagree with other issues besides your child's identification, evaluation, or placement, you have a right to complain to the School §504 Coordinator.

15. You have a right to file a complaint with the Office for Civil Rights (OCR) of the United States Department of Education. The address of the OCR Regional Office responsible for Arizona is Office for Civil Rights, U.S. Department of Education, Federal Building, 1244 Speer Boulevard, Suite 310, Denver, CO 80204-3582,

You have rights regarding your child's educational records under the Family Educational Rights and Privacy Act (FERPA). FERPA give the parent or guardian the right to:

- Inspect and review his/her child's educational record.
- Make copies of these records.
- Receive a list of all individuals having access to these records.
- Ask for an explanation of any item in the record.
- Ask for an amendment to any report on the grounds that it is inaccurate, misleading, or violated the child's rights.
- A hearing on the issues if the school refuses to make the amendment.

This Notice of Rights was given to:

_____		_____
Person		Relationship to Student

By _____	_____	_____
Name	Title	Date

Questions? Contact the School §504 Coordinator at 928-779-9880
Phone

A copy of this completed form must be place in the student's file each time it is sent to parents.



Section (§) 504 Grievance Procedure

Attachment E

Section 504 of the Rehabilitation Act of 1973 (§504) prohibits discrimination on the basis of disability. If you think PFCS has committed or permitted a discriminatory act involving a student that violates §504, you may file a grievance.

How to file a complaint:

1. The complaint must be in writing. It must include:
 - your name and address (or that of whoever is filing the complaint);
 - a brief description of the action you think was discriminatory;
 - who did it;
 - the location of the alleged discriminatory act; and
 - the date it happened.

Send the complaint to the School §504 Coordinator:

Patricia Hirsch
School §504 Coordinator and Compliance Officer (for Student Concerns Only)
Student Support Services Department
Pine Forest Charter School
2257 E. Cedar Ave.
Flagstaff, AZ 86004
patty.hirsch@pineforestschool.com
Telephone: 928-779-9880

2. Upon becoming aware of an act that you think was discriminatory, you have 60 days in which to file a grievance complaint with the School. Written requests for waiver of this 60 day filing window will be considered by the School §504 Coordinator on a case-by-case basis and will be granted only in cases where reasonable grounds exist to believe that the person filing the complaint could not have filed the complaint within the specified time period.
3. Upon receipt of your complaint, you will receive a copy of this grievance procedure and your rights under §504. The School §504 Coordinator will also schedule a meeting with you to discuss your complaint and clarify your concerns.
4. If you and the School agree, the School may offer you an opportunity to engage in a meeting with the school §504 Multidisciplinary Team (MDT), and facilitated by the School §504 Coordinator, to try to resolve the problem informally. Participation in this informal resolution meeting is voluntary for both you and the School.
5. If the complaint cannot be resolved informally, an investigation will be conducted by the School. During the course of the investigation, both sides shall have an opportunity to submit evidence about the complaint. The investigation may be conducted by the School §504 Coordinator or, at his discretion, he may appoint an impartial third party as his designee to conduct the evaluation. Regardless of who the investigator is, the School §504 Coordinator will be responsible for insuring that the investigation is thorough and conducted in an impartial manner. The School §504 Coordinator will maintain files and records on all §504 complaint investigations. In the event that the §504 Coordinator is the accused, the School Director will assume all of the aforementioned procedures.
6. Within 45 days of the date the School received your complaint, you will receive a written report of the findings and, if applicable, recommendations of the investigation. This report will explain what the investigation found and what actions, if any the School will take to resolve the problem.

7. If you are not satisfied with how your complaint was resolved, you can request that the findings be reconsidered through administrative review. To request administrative review/ reconsideration of the findings in your case, you must submit your request, in writing, to the School §504 Coordinator within 10 business days of the date you received the written report of findings on how your complaint will be resolved. If you do not request administrative review within this timeframe, the School will consider the complaint closed upon completion of the investigation.

8. Upon the timely receipt by the School of your written request for administrative review/ reconsideration, the investigation findings will be reviewed by either the School §504 Coordinator or, when the School §504 Coordinator was the complaint investigator, the **PFCS** Director of Student Support Services. In the event that the Director is not available to conduct the review in a timely manner, it will be conducted by the next higher administrative authority in the School. You will receive a written decision from the reviewer within 30 days of the date that the School received your written request for reconsideration.

9. You are hereby notified that this grievance procedure is not the only way to resolve a complaint. You also have the right to an impartial due process hearing if you disagree with **PFCS** about your child's identification, evaluation, or placement under §504. You have the right to participate personally, present evidence, bring witnesses, and to be represented by an attorney (at your expense) at the hearing, if you wish.

10. If you want to request a §504 due process hearing, you must submit your request in writing to the School §504 Coordinator at the address above. A date will be set for the hearing and an impartial hearing officer will be appointed by the School. You will be told in writing of the hearing date, time, and place. The impartial hearing officer must render a decision within 45 days after the School's receipt of the request for a hearing. This can only be delayed if the parents and School jointly agree to the delay or if the Hearing Officer has granted a continuance at the request of one of the parties. The decision made by the impartial hearing officer is final unless the parents or **PFCS** appeal the decision to the appropriate state or federal court.

11. Free or low-cost legal services and/or educational consultation may be available to you through:

Arizona Center for Disability Law

3839 N. Third Street, Suite 209

Phoenix, AZ 85012

Telephone/TDD: 602-274-6287; Fax: 602-274-6779

Toll Free: 800-927-2260

12. You also have a right to file a complaint with the Office for Civil Rights (OCR) of the United States Department of Education. The address of the OCR Regional Office responsible for Arizona is Office for Civil Rights, U.S. Department of Education, Federal Building, 1244 Speer Boulevard, Suite 310, Denver, CO 80204-3582. Filing a complaint with this agency does not take away your right to resolve the complaint through this grievance procedure.



Attachment F

Notice of Section 504 Multidisciplinary Team (MDT) Meeting

Dear Parent of _____
Student Name

The Section 504 Multidisciplinary Team (MDT) will be meeting on _____
Date

at _____ a.m./p.m. at _____
Time Location

The purpose of the meeting is:

- ☐ decide if the student is eligible for §504 services
- ☐ write an Accommodation Plan for the student
- ☐ decide if the student needs to be reevaluated
- ☐ annual review of the student's Accommodation Plan
- ☐ discuss discipline issues (Manifestation Determination)

We hope that you will be able to join us for the meeting. If you would like to come, but need a change in the meeting time or place, please call _____ at 928-779-9880
Contact Person Phone

We will try to find a time that is good for you and the school.



Eligibility Determination for Section 504

Student _____ Date of Birth _____

School _____ Grade _____ Date _____

§504 Team Members	Position
	Has knowledge of student
	Interprets evaluation data
	Has knowledge of educational interventions

Indicate sources of information used in this determination:

☐ achievement test scores

☐ medical information

☐ measures of adaptive behavior

☐ psycho-educational reports

☐ teacher recommendations/ratings

☐ others (specify) _____

1. Specify the impairment: _____

2. Check the major *life* activity: ☐ thinking ☐ talking ☐ processing ☐ learning ☐ social/emotional ☐ caring for oneself
☐ Other (please specify _____)

Make sure the eligibility team focuses on the major life activity as a whole, not in a particular class or a particular sub-class



Notice of Section 504 Ineligibility

Student _____ Date of Birth _____

School _____ Grade _____ Date _____

Dear Parent:

This letter is to inform you that your child _____ ☐ is not **or** ☐ is no longer eligible for §504 services. This decision was made by the §504 Multidisciplinary Team (MDT), who determined that your child does not meet eligibility requirements, as specified by law.

If you have any questions about this and would like to discuss it, please feel free to call me.

Sincerely,

School Section 504 Coordinator

Phone #

A copy of Parent Rights is enclosed.

Copies to: §504 Multidisciplinary Team (MDT)
 School Principal

Rev. 10/16

4. _____

5. _____

6. _____

D. Participant Signatures: The following have participated in the development of this Plan and agree with its implementation:

<u>Signature of Participants</u>	<u>Title</u>
_____	_____
_____	_____
_____	_____

E. Indicate the date that parents were provided or sent a copy of this plan: _____

Send a copy of Parents Rights if parents do not attend meeting.

F. Attachments: Staff fill in this area.

G. Suggested Annual Review Date: _____



Attachment J

Pine Forest Charter School
Established in 1995

2257 E. Cedar Ave., Flagstaff, AZ 86004, 928-779-9880, Fax 928-779-9792

Section 504 Accommodation Plan:
Certification of Teacher Receipt & Responsibilities

School Year: 20__ - 20__

Student _____, _____ Date of Birth _____
Last Name First Name

Grade _____ School _____

A. §504 Disability: The above-named student is eligible for §504 accommodations due to the following condition(s):

B. Assigned §504 Plan Monitor: _____

C. Assigned Teacher(s): _____

I attest by my signature below that, on the date indicated, I received a true and accurate copy of the above named student's 504 Accommodation Plan, and that I have read and understand it. I further understand that, as the student's classroom teacher, it is my legal responsibility under §504 of the Rehabilitation Act of 1973 to implement these accommodations, as written, with this student and I agree to do so (34 CFR 104).

D. Teacher Signatures:

Signature	Title	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

E. Witnessed by (§504 Coordinator/ Monitor, or administrator providing information):

Signature	Title	Date
_____	_____	_____



Attachment K

Section 504 Monitoring Form

Student _____ School _____

Directions: This form is to be used in order to document monitoring of the §504 Accommodation Plan. It is to be used for each school year. This must be completed every 12 weeks or more often if needed.

Name of §504 Monitor: _____

Monitoring Activity/Outcome	Date of Monitoring	Initials of Monitor



504 STUDENT TRIMESTER SUCCESS CHECK

Date: _____

Class: _____

Teacher: _____

_____ is a §504 student in your class. As of today's date, please mark any of the following that apply:

I am following the student's §504 Accommodation Plan as written. ☐ YES ☐ NO If NO, please explain: _____

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

SUBJECT: _____ This trimester, this student is receiving the percent grade of _____ in this subject.

(If the student is failing a class, the reason(s) are (check all that apply):

Low Test scores ☐ Lack of Effort ☐ Homework ☐ Attendance ☐

Other ☐ _____

I have contacted the student's parent. ☐ Date: _____

We **DO** need to meet regarding this student. ☐

We **DO NOT** need to meet regarding this student. ☐

Please return this form to _____ by _____.



Attachment M

Pine Forest Charter School

Established in 1995

2257 E. Cedar Ave., Flagstaff, AZ 86004, 928-779-9880, Fax 928-779-9792

§504 MANIFESTATION DETERMINATION REVIEW DOCUMENTATION

I. BACKGROUND

Student Name: _____ Date of Birth: _____

School: _____ Grade: _____

Description of §504 Impairment: _____
(Category/Behavioral Characteristics/Severity)

Date of Current §504 Plan: _____

Date of Current Evaluation: _____

YES NO

☐ ☐ Illegal drugs/controlled substances were involved in this incident.

☐ ☐ A weapon was involved in this incident.

II. MANIFESTATION DETERMINATION REVIEW

Date: _____ Time: _____ Location: _____

Date of the infraction: _____

Nature of the offense(s) alleged against the student and information related to allegations that were considered

Current suspension is for _____ days. Total accumulated days of suspension _____.

III. THE TEAM CONSIDERED THE FOLLOWING RELEVANT INFORMATION IN THE STUDENT'S FILE:

☐ Current evaluation and diagnostic results ☐ Attendance records

- ☐ Current academic performance
- ☐ Teacher Observation of student*
- ☐ Information supplied by parents*

- ☐ Disciplinary records
- ☐ Staff reports
- ☐ Current §504 Plan*

* **Required for review**

Description of any other relevant information considered: _____

IV. ANALYSIS

V. TEAM'S CONCLUSION REGARDING RELATEDNESS

YES NO

- ☐ ☐ Was the conduct in question caused by, or did it have a direct and substantial relationship to the child's §504 disability?
- ☐ ☐ Was the conduct in question the direct result of the School's failure to implement the §504 Plan as written?

NOTE: If either of the above questions is checked "yes", the team must find that the conduct in question was a manifestation of the child's disability.

- ☐ ☐ The conduct in question WAS a manifestation of the child's §504 disability.

YES NO

- ☐ ☐ Was consensus reached? If no, describe area and nature of disagreement.
- ☐ ☐ Based on a functional behavior assessment, was a behavior plan created/modified to address the current behavioral issue?
- ☐ ☐ §504 Plan review to be scheduled?

(Minutes taken by)

§504 Team Members:

Role	Name
School Administrator	_____
School §504 Coordinator	_____
General Education Teacher	_____
Evaluator	_____
Parent	_____
Other: _____	_____
Other: _____	_____



Functional Behavior Assessment

Student: _____ Date of Assessment: _____ Attachment N

Assessment done by: _____ School: _____ Grade: _____

This functional behavior assessment is being done because (check all that apply):

- ☐ The behavior is severe enough or frequent enough to interfere with the student's learning.
- ☐ The behavior interferes with other student's learning.
- ☐ Traditional supports/interventions/consequences have not worked.
- ☐ A change of placement is being considered
- ☐ The school is considering suspending/expelling the student for the 11th day this school year.

Define the problem.

Problem Behaviors	How often does it happen?	How long does it last?	How intense is it?	What happens to the student afterward?

Student: _____ Date of Assessment: _____

Answer key questions.

1. **Who** is usually there when the behaviors happen?
2. **Who** is usually there when the behavior does **NOT** happen?
3. **What** is usually going on just **before** the behavior happens?
4. **What** is usually going on when the behavior does **NOT** happen?
5. What happens **during** the behavior to the student? To others?
6. What usually happens **after** the behavior to the student? To others?
7. **Where** does the behavior usually happen?
8. **Where** does the behavior almost never happen?
9. Does the student have the necessary skills to change the behavior?
10. Is the student's placement appropriate or is it contributing to the behavior?
11. Is the student's 504 Plan appropriate or are the goals too easy or too hard?

Student: _____ Date of Assessment: _____

Decide what purpose the behavior serves for the student.

Use the information from the questions on page 2 to think about situations in which the behavior occurs. Are there any consistent patterns? The checklist below may be helpful. Remember, some behaviors may serve more than one purpose.

The behavior seems to serve the following purpose for the student:

Checklist

The purpose of the behavior may be ATTENTION if:

It happens when you are not paying attention to the student (you are talking to someone else, etc).

It happens when you stop paying attention to the student.

The purpose of the behavior may be ESCAPE/AVOIDANCE if:

It happens when you ask the student to do something that s/he doesn't like or want to do.

It stops after you stop "making demands."

The purpose of the behavior may be GETTING SOMETHING if:

It happens when you take away a favorite toy, food or activity.

It stops soon after you give the student a toy, food or activity s/he likes or asked for recently.

It happens when the student asks for a toy, food or activity and can't have it.

The purpose of the behavior may be SELF-REGULATION if:

It tends to happen over and over again, in a rhythmic or cyclical manner.

It tends to happen when there is either a lot going on in the area or very little (noise, movement, people.)

The student can still do other things at the same time s/he is doing the behavior.

The purpose of the behavior may be PLAY if:

It occurs over and over again in a rhythmic cyclical manner.

It occurs repeatedly when no one else is around.

The student seems to enjoy doing the behavior.

The student seems to be in his or her own world when doing the behavior and s/he can't do other things at the same time



Behavior Plan

Student: _____ Grade: _____

Attachment O

Plan developed by: _____ Date of Plan: _____

Preventing the behavior.

1. Describe how you will change the situations (who, what, when, where) that seem to be associated with behavior.

-

Teaching new behavior.

2. What other behavior or skills will you (or others) teach the student that will meet his/her purpose in a more acceptable way (e.g., if the student screams to get attention, how will you give him/her attention before s/he screams)? How will you teach it?

Reacting to the behavior.

3. If the problem behavior happens, how will you (or others) react so that it does not feed into the student's purpose?

Student: _____ Date of Plan: _____

List any changes that need to be done to help the student succeed:

- Preferential seating – (describe):
- Lighting (describe):
- Room set up (describe):
- Noise Level (describe):
- Planned visual or verbal cues or schedule (teacher):
- Sensory breaks (describe type and frequency):
- Modifications to curriculum – (Special Education only) (describe):
- Accommodations (describe):
- Instructions to student (describe):
- Extended time (describe):
- Assistive technology (describe):
- Proximity control (closeness to student) (describe):
- Other (describe):

Student: _____ Date of Plan: _____

Evaluating the plan.

Try the plan for 2 to 6 weeks. Keep in mind that sometimes changing how we react may temporarily cause the behaviors to increase. This is because if the behavior used to get the student what s/he wanted, s/he will try harder to make it work for her/him again. Then check to see how successful the plan is.

1. Was the plan followed consistently?

2. How successful was it at preventing the behavior?

3. How successful was it at teaching new behaviors?

4. How successful were you (or others) at reacting differently to the behavior?

5. Do you still feel your theory about the purpose of the behavior was correct?

6. What positive changes have you seen?

7. What areas of the plan do you need to continue to work on using as planned?

8. What areas of the plan need to be changed?

Student: _____ Date of Plan: _____

People involved in developing the plan:

Individual	Relationship to Student
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

For student with 504 Plans:

When did the 504 Committee approve the Behavior Plan? Date: _____



Established in 1995

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Section 504 Annual Notice

The **Pine Forest Charter School (PFCS)** does not discriminate on the basis of race, color, national origin, sex, disability, or age in its employment and educational practices, programs, and activities. If you have reason to believe that **PFCS** may have committed or permitted a discriminatory act that violates §504 or any other applicable state or federal regulation, you may file a grievance with the School. The following people have been designated to handle inquiries regarding the non-discrimination policies of the School.

For Student Concerns:

School 504 Coordinator OR
Special Education Services Department OR
Executive Director
Pine Forest Charter School
2257 E. Cedar Ave.
Flagstaff, AZ 86004
Telephone: 928-779-9880

For Employee and Other Non-Student Concerns:

School 504 Coordinator OR
Executive Director
Pine Forest Charter School
2257 E. Cedar Ave.
Flagstaff, AZ 86004
Telephone: 928-779-9880