The Cleveland Metropolitan School District respects and protects students’ right to be free from unlawful discrimination on the basis of race, color, national origin, citizenship status, religion, sex, sexual orientation, economic status, marital status, pregnancy, age, or disability, in all decisions affecting admissions; membership in school sponsored organizations, clubs or activities; access to facilities; distribution of funds; academic evaluations or any other aspect of school sponsored activities.

(Updated September 2017)
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Forms
A.  Section 504 Referral for Assistance
B1/B2.  Section 504 Prior Written Notice and Notice of Conference
C.  Section 504 Eligibility Determination Evaluation Report
D.  Section 504 Plan
E.  Section 504 Evaluation/Manifestation Determination Review
F.  Section 504 Complaint Filing Form
G1/G2.  Consent for Evaluation and Consent to Share Information
POLICY
SECTION 504 OF THE REHABILITATION ACT OF 1973
AND THE ADA AMENDMENTS ACT

The Cleveland Metropolitan School District ("District") will ensure that no student with a disability as defined by Section 504 of the Rehabilitation Act of 1973 (Section 504) and the Americans with Disabilities Act Amendments Act (ADAAA) within the District’s jurisdiction will be denied, because of his/her disability, participation in curricular, intramural, or interscholastic activities or any of the services offered or rendered regularly to the students of this District. No otherwise qualified person shall, solely by reason of his/her disability, be subjected to discrimination under any program or activity sponsored by the District. The District is committed to ensure that students with disabilities be identified, evaluated, and provided with a free appropriate public education. The District does not discriminate on the basis of disability with regard to admission, access to education services, treatment or employment in its programs and activities.

Effective January 1, 2009, the ADAAA also amended the Rehabilitation Act of 1973 such that the definition of a disability under the Rehabilitation Act (29 U.S.C. 705) is the same as the definition of a disability under the ADAAA (42 U.S.C. 12102). This policy incorporates the amendments to the Americans with Disabilities Act.

The Board of Education directs the Chief Executive Officer to promulgate guidelines in accordance with this policy.

Facilities/Program

The District’s educational program shall be equally accessible to all students at each grade level. Barrier-free access to school facilities shall be provided to ensure that no individual with a disability is denied an opportunity to participate in a District program available to persons without disabilities. Students with disabilities shall have facilities of a type and quality comparable to those of students without disabilities.

Identification, Evaluation and Placement

Identification/Child Find
The District shall make all reasonable efforts to identify students with disabilities who reside within the District in order to determine possible eligibility for special education and/or related services or supplementary aids and/or services in accordance with federal and state law and this policy and procedures manual.

Evaluation
Any student who, because of a disability, needs or is believed to need special education or related services, or is suspected of having a physical or mental disability which may substantially limit a major life activity, may be referred for an evaluation. Evaluations must address the concerns raised and the referral questions. As an example, if the suspected disability involves a medical issue, evaluation may consist of consultation with the physician, identification of care within the building and notification to others who may work with the child. All evaluation and placement decisions will be made by a group of persons knowledgeable about the student, the meaning of the evaluation data, and the placement options (Evaluation Team). When evaluating
a student to determine eligibility under Section 504, the assessment will not be limited to whether the mental or physical impairment substantially limits the major life activity of learning. The evaluation team shall not take into account the ameliorating effects of mitigating measures (other than ordinary eyeglasses or contact lenses) used by a student when determining if the student has a disability. A student may be eligible for a Section 504 plan if the student does not require educational services but does require modifications to District policies, health services or food services in order to participate in District programs and activities.

Parents and guardians shall be invited to participate in Section 504 meetings so as to have a meaningful opportunity to provide input into Section 504 team decisions regarding the identification, evaluation and placement of students with disabilities. If the District denies a parental request for a Section 504 evaluation, it will provide with written notice of its procedural safeguards.

Placement
A free appropriate public education shall be provided for each child determined to be qualified as a student with a disability under Section 504. A qualified student with a disability shall be placed in an educational setting with his/her non-disabled peers to the maximum extent appropriate (“least restrictive environment” or “LRE”). If a student has an impairment that is episodic in nature or in remission, the student is eligible for placement pursuant to Section 504 if the impairment, when active, substantially limits one or more major life activities. If the qualified student requires related aids and/or services in a regular education classroom, the student’s principal, who is also the school building’s 504/ADAAA coordinator, shall involve the student’s regular education teacher(s) in the Section 504 evaluation and placement process to ensure that they:

A. Have knowledge of the law and the relationship between the student's disability and his/her need for regular or special education and/or related aids and/or services;

B. Have knowledge of the student’s needs;

C. Ensure that the student’s individualized needs are met as adequately as the needs of nondisabled students are met.

Hereafter, the policy will refer to Section 504 with the understanding that the ADAAA also applies.

Reevaluation/Change in Placement

Section 504 requires a periodic meeting to review the plan’s efficacy and ongoing need. Additionally, this allows the succeeding teachers and service providers an opportunity to learn of the student’s needs and ensure that the plan is implemented at the beginning of each school year. The District requires the student’s team, identified as persons knowledgeable of the student, to conduct the periodic review annually.

An “evaluation” is required prior to a change of placement. Changes of placement would include graduation and disciplinary removals in excess of ten (10) consecutive days. The
evaluation requirement may be satisfied with the manifestation determination review according to the guidelines promulgated pursuant to this policy.

**Discipline**

The discipline procedures described in the *Student Code of Conduct* shall be used in all situations in which a qualified student with a disability under Section 504 (or suspected qualified disability) may be subject to suspension or expulsion. Since expulsion or cumulative forms of suspension may, in cases when the student will be excluded from school ten (10) or more days, constitute a change in placement, a group of persons knowledgeable about the student, including the parent, shall convene a meeting to discuss whether the behavior that led to the proposed disciplinary action is directly and substantially related to the child’s disability. In this process, the team re-evaluates the student. If the team’s determination is that the behavior leading to the proposed disciplinary action is not a manifestation of the child’s disability then the child shall be disciplined according to the *Student Code of Conduct*, the same as non-disabled students.

**Enforcement**

The District will utilize a general complaint procedure that incorporates the appropriate due process standards and provides for the prompt and equitable resolution of alleged violations of Section 504 by the District. The District has appointed a Section 504 Compliance Officer, who is charged with interpreting Section 504/ADAAA and corresponding regulations on behalf of the District, directing District policy and overseeing the provisions of this policy and procedure manual. The Section 504 Compliance Officer reviews any alleged violations of Section 504 within the District. If it is deemed that a violation has occurred, the Section 504 Compliance Officer will recommend corrective action for those violations directly to the Chief Executive Officer (or designee).

**Complaint Procedure**

In accordance with Section 504 of the Rehabilitation Act of 1973 (Section 504), any student who believes s/he has been the victim of discrimination or harassment (including bullying) based upon disability or who believes s/he is entitled to or has been denied a free appropriate public education to which s/he as a student with a disability is entitled, is encouraged to report the alleged facts surrounding said treatment, entitlement or denial, within ten (10) days of the alleged action to the Section 504 Compliance Officer. Any complaint alleging a violation of law and/or this policy shall be investigated by or at the direction of the Section 504 Compliance Officer. In addition to the Complaint Procedure set forth, alleged violations of Section 504 may be challenged through an impartial due process hearing or reported to the United States Department of Education, Office for Civil Rights at 600 Superior Avenue East, Suite 750, Cleveland, Ohio 44114-2611; Telephone: 216.522.4970; Facsimile: 216.522.2573; TDD: 877.521.2172; E-Mail: OCR.Cleveland@ed.gov.

**Program Evaluation and Compliance**

The District shall evaluate its programs and practices on nondiscrimination and the provision of services under Section 504, in accordance with federal law, and document its findings on an on-
going basis and will adjust its practices as needed. The District shall submit assurance of compliance as required by federal law.
**DEFINITIONS**

The Rehabilitation Act of 1973, 29 U.S.C. Sec. 794 et seq.:

**Sec. 794**

Nondiscrimination under Federal grants and programs;

“No otherwise qualified individual with a disability in the United States, as defined in Sec. 705(20) of this title, shall, solely by reason of her or his disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance or under any program or activity conducted by any Executive agency or by the United States Postal Service.” (29 U.S.C. Sec. 794(a))

**Individual with disability:** Any individual who (A) has a physical or mental impairment that **substantially limits** one or more of the major life activities of such individual; (B) has a record of such an impairment; or (C) being regarded as having such an impairment. (42 U.S.C. 12102)

**Major Life Activities:** (A) Include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. (42 U.S.C. 12102)

(B) Major Bodily Functions include, but are not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions. (42 U.S.C. 12102)

**Substantially Limits:** (A) An impairment that substantially limits one major life activity need not limit other major life activities in order to be considered a disability. (B) An impairment that is episodic or in remission is a disability if it would substantially limit a major life activity when active. (C) The determination of whether an impairment substantially limits a major life activity shall be made without regard to the ameliorative effects of mitigating measures such as the following examples: medication, medical supplies, equipment, low-vision devices (which do not include ordinary eyeglasses or contact lenses), prosthetics including limbs and devices, hearing aids and cochlear implants, mobility devices, or oxygen therapy equipment and supplies, reasonable accommodations or auxiliary aids and/or services. This list is not exhaustive.
Has a record of: Has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities.

Is regarded as: (A) has a physical or mental impairment that does not substantially limit major life activities but that is treated by a recipient as constituting such a limitation; (B) has a physical or mental impairment that substantially limits major life activities only as a result of the attitudes of others toward such impairment; or (C) does not have a physical or mental impairment but is treated by a recipient as having such an impairment.

Transitory Impairment: The Act shall not apply to impairments that are transitory and minor. A transitory impairment is an impairment with an actual or expected duration of six (6) months or less.

The following definitions apply:

The Rehabilitation Act of 1973: Also referred to as Section 504


Individuals with Disabilities Education Improvement Act: IDEIA, 20 U.S.C. 1401 et seq.

School Staff: A group of knowledgeable persons familiar with the student and his/her needs. Within the District’s Section 504 policy and procedure manual, school staff may include, but are not limited to, the school principal, psychologist, general education teacher, guidance counselor, administrative staff and nurse (if applicable).
The Board of Education directs the Chief Executive Officer to promulgate these administrative guidelines and procedures for implementation throughout the District.

The following is a description of the rights of District students with qualified Section 504 disabilities or those students suspected of having such disabilities. School staff are to ensure that each student with, or suspected of having, a Section 504 disability, and her/his parent(s) are kept fully informed concerning decisions about the student and about the student’s due process rights in case the family disagrees with any decisions made by the District under Section 504.

It is important to note that when evaluating a student under Section 504, the student’s Section 504 team is to consider all appropriate assessments and that Section 504 prohibits the District from categorically excluding any particular type of assessment from consideration.

District staff must ensure that parents of students are provided with *Notice of Parent/Guardian/Student Rights*, which sets forth the following rights for parents of such students:

### NOTICE OF PARENT/GUARDIAN/STUDENT RIGHTS

Notice, and other procedural safeguards, shall be provided to parent(s) and guardian(s) with respect to actions regarding the identification, evaluation or educational placement of students with disabilities. Below is a description of the rights granted by Federal law to individuals with disabilities. It is the intent of Section 504 of the Rehabilitation Act of 1973 to keep you fully informed concerning decisions about your child and to inform you of your rights if you disagree with any of these decisions.

You have the right to:

a) Have your child take part in, and receive benefits from public education programs without discrimination because of his/her disability.

b) Have the District advise you of your rights under Federal law.

c) Receive notice with respect to identification, evaluation, or placement of your child.

d) Have your child receive a free appropriate public education that consists of regular or special education and related aids and/or services designed to meet the student’s needs as adequately as the needs of nondisabled students are met. This also includes the right to be educated with non-disabled students to the maximum extent appropriate.

e) Have your child educated in facilities and receive services comparable to those provided non-disabled students.

f) Have your child receive special education and related services if s/he is found to be eligible under Individuals with Disabilities Education Improvement Act, and/or regular or special education and related aids and/or services under Section 504.

g) Have evaluation, educational, and placement decisions made based upon a variety of information sources, and by persons who know the student, and are knowledgeable about the evaluation data and placement options, including the child’s parents.

h) Have transportation provided to and from an alternative setting at no greater cost to you than would be incurred if the student were placed in a program operated by the District.
and not in addition to any cost normally charged to a student without a disability for such transportation.
i) Have your child be given an equal opportunity to participate in nonacademic and extracurricular activities offered by the District.

j) Examine all relevant records relating to decisions regarding your child’s identification, evaluation, education program, and placement.
k) Obtain copies of educational records at a reasonable cost unless the fee would effectively deny you access to the records, the same as for all individuals requesting such records.
l) A response from the District to reasonable requests for explanations and interpretations of your child’s records.
m) Request amendments of your child’s educational records if there is reasonable cause to believe that information contained in the record(s) is inaccurate, misleading or otherwise in violation of the privacy rights of your child. If the District refuses to amend the record(s), you have the right to request a hearing and/or to place in the record a statement of why you disagree with the information it contains.
n) Request mediation or an impartial due process hearing related to decisions or actions regarding your child’s identification, evaluation, educational programs, or placement. You and your child may take part in the hearing and be represented. Hearing requests must be made to the Section 504 Compliance Officer.
o) Receive all information in the parent’s native language and mode of communication.
p) File a local grievance or a complaint with the Office for Civil Rights at any time

The District’s Section 504 Compliance Officer, the person in the District responsible for assuring that the District complies with Section 504 is:

Wayne J. Belock, Esq.
Section 504 Compliance Officer
Cleveland Metropolitan School District
1111 Superior Avenue East, Suite 1800
Cleveland, Ohio 44114
Phone: (216) 838-0070
E-mail: Wayne.Belock@clevelandmetroschools.org

The Office for Civil Rights of the United States Department of Education enforces the requirements of Section 504 of the Rehabilitation Act of 1973. The address of the Ohio Office is:

Office for Civil Rights, Cleveland Office
U.S. Department of Education
1350 Superior Avenue East, Suite 325
Cleveland, Ohio 44115
Telephone: 216.522.4970
Facsimile: 216.522.2573
TDD: 877.521.2172
E-Mail: OCR.Cleveland@ed.gov.
REFERRAL

Section 504 Referral Form

It is the responsibility of the District to identify and evaluate students who, within the intent of Section 504 of the Rehabilitation Act of 1973, require regular or special education and related aides and/or services in order to receive a free appropriate public education (FAPE).

Any student who needs, or is believed to need, accommodations or services not available through existing programs in order to receive a free appropriate public education may be referred by a parent, teacher, or a third party for identification and possible evaluation of the student’s individual educational needs.

The school principal is the school building’s Section 504 coordinator and shall have ample referral forms (FORM A) available in the main office for parents, teachers and other individuals who request them.

The Section 504 Referral Form (FORM A) must be submitted directly to the school principal and the principal shall sign the original form upon receipt and make three (3) copies. A copy shall be forwarded to (1) the school psychologist; (2) the Section 504 Compliance Officer; and (3) the parent. The original shall be placed in the student’s permanent educational file located in the main office.

Upon referral for an evaluation, the parent/legal guardian, or student if over 18, shall also be provided with a copy of the description of rights granted by the federal law to students with disabilities.

SECTION 504 REFERRAL PROCEDURES

If a parent or school staff member suspects that a child may have a disability and may be entitled to special accommodations and/or services under Section 504, the principal shall follow these procedures:
<table>
<thead>
<tr>
<th>PROCEDURE</th>
<th>PERSON RESPONSIBLE</th>
<th>FORMS (S)</th>
</tr>
</thead>
</table>
| 1. INITIAL REFERRAL FOR SECTION 504 EVALUATION  
(When a parent refers a child for a Section 504 evaluation)  
A parent may *verbally or in writing* request a Section 504 evaluation to the child’s teacher, principal, other administrative staff, school nurse, school psychologist, school social worker or guidance counselor.  
- If the parent requests a 504 evaluation, then the staff member must immediately inform the parent that the parent must fill out a “Referral Form” and that, upon completion, the form must be given directly to the principal.  
- If the parent requires assistance in writing the referral, the staff member shall assist the parent in filling out the referral form, whether or not the staff member agrees with the grounds for the referral.  
(Referrals from third parties)  
When a third party submits a written referral for a Section 504 Evaluation, the child’s parent/legal guardian must be notified of the referral. If the referral is given to the teacher, then that teacher must immediately forward the form to the principal (or designee) for action.  

<table>
<thead>
<tr>
<th>POST REFERRAL</th>
<th>Principal</th>
<th>Section 504 Referral Form (FORM A) &amp; Section 504 Notice to Parents w/ 504 Procedural Safeguards (FORM B)</th>
</tr>
</thead>
</table>
| 2. The principal signs and dates the referral. Three copies of the referral are made and within a reasonable time, the principal gives a copy of the referral to the  
1. parent  
2. school psychologist  
3. District Section 504 Compliance Officer  
The original form is placed in the student’s permanent educational file. | Principal | Section 504 Referral Form (FORM A) & Section 504 Notice to Parents w/ 504 Procedural Safeguards (FORM B) |
| INITIAL DETERMINATION OF SUSPICION | Principal | Section 504 Notice to Parents w/ 504 Procedural Safeguards (FORM B) |
| 3. An initial determination is made with deference given to the parent, psychologist and nurse (if applicable), whether the school suspects that the child has a present disabling condition that substantially limits a major life activity. A doctor’s statement does not make the child eligible for a 504 plan. It can be used in conjunction with all data to be reviewed in the team determination.  
The principal, upon consultation with the parent, teacher, school psychologist, guidance counselor (if applicable), the child’s doctor and/or school nurse (if applicable) forwards a Section 504 Notice to Parents with 504 Procedural Safeguards indicating whether or not the school suspects the child has a present disabling condition that substantially limits a major life activity.  
If the child has gone through the IDEIA referral and evaluation | Principal | Section 504 Notice to Parents w/ 504 Procedural Safeguards (FORM B) |
process and is deemed ineligible under IDEIA, the child does not need to start over at the referral stage for Section 504. Current evaluation data can assist in the determination of 504 eligibility.

If the school team does not suspect that the child has a disability that substantially limits a major life activity, then the team is not obligated to move forward with a full Section 504 evaluation. The school team should provide the parent with procedural safeguards.

<table>
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<tr>
<th>EVALUATION &amp; ELIGIBILITY DETERMINATION</th>
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<tbody>
<tr>
<td>If the school team does suspect that the child may be qualified under Section 504, the team must move forward with a full Section 504 evaluation within sixty (60) days of receipt of parental consent to conduct the evaluation. The school team shall make efforts to include the parent and shall include at least one of the child’s general education teacher(s), the school psychologist and school nurse (if applicable) and other applicable support staff, i.e., audiologist, PT, SLP, OT.</td>
</tr>
<tr>
<td>Parent/legal guardian shall be notified in writing of the Section 504 team meeting to determine eligibility under Section 504.</td>
</tr>
</tbody>
</table>

- If the student is found to be eligible, the school team should determine if development of a Section 504 plan is necessary at this time.
- If the student is found to be not eligible, the school team should provide parent with procedural safeguards.

<table>
<thead>
<tr>
<th>SECTION 504 PLAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>4. Consent of parent/legal guardian is obtained for implementation of the plan.</td>
</tr>
<tr>
<td>Principal</td>
</tr>
</tbody>
</table>

Section 504 Notice to Parents with 504 Procedural Safeguards (FORM B)

| 5. After the Section 504 evaluation meeting, the principal shall make four (4) copies of the Section 504 Evaluation and Plan and give a copy to: |
| Principal |

- parent
- the child’s general education teacher(s)
- school psychologist and/or nurse (if applicable)
- Section 504 Compliance Officer, Legal Services Dept.
- student’s permanent educational file (original)

| 6. Section 504 plan is implemented with periodic review, at least annually. |
| General Education Teacher and designated team members |

| Section 504 Evaluation and Plan (FORM D) |
### SECTION 504 - REFERRAL FOR ASSISTANCE

**Student Name:** ___________________________  **Date of Birth:** ___________________________

**School:** ___________________________  **Grade:** ______  **Date of Referral:** ___________________________

**Parent Name(s):** ___________________________

**Address:** ___________________________

**Communications:**

A. **Statement of Suspected Section 504 Disability:**

Please complete this form if you suspect that this student may have a physical or mental impairment that substantially limits one or more major life activities. (See below).

B. **Nature of Concern** (attach additional sheets if necessary).

1. Check suspected physical/mental impairment and attach data sources supporting the diagnosis.

   - Asthma
   - Attention Deficit Disorder/ADHD
   - Brain injury
   - Cancer
   - Cerebral Palsy
   - Developmental Aphasia
   - Diabetes
   - Dyslexia
   - Emergent Allergy
   - Emotional Illness
   - Epilepsy
   - Hearing
   - Heart Disease
   - Minimal Brain Dysfunction
   - Multiple Sclerosis
   - Muscular Dystrophy
   - Orthopedic Impairment
   - Recovering Chemically Dependent
   - Seizures
   - Speech Impairment
   - Visual Impairment
   - Other: ___________________________

2. Check any major life activity(ies) that are substantially limited. (This list is not exhaustive)

   - Bending
   - Breathing
   - Caring for one’s self
   - Communicating
   - Concentrating
   - Eating
   - Hearing
   - Learning
   - Lifting
   - Performing manual tasks
   - Reading
   - Seeing
   - Sleeping
   - Speaking
   - Standing
   - Thinking
   - Walking
   - Working
   - Other: ___________________________
DATE: _______________ STUDENT’S NAME: ___________________________ STUDENT'S DATE OF BIRTH: _______________

3. Check any major bodily functions that are limited. (This list is not exhaustive)
   - Bladder
   - Bowel
   - Brain
   - Circulatory/Cardiovascular System
   - Digestive System
   - Endocrine System
   - Respiratory System
   - Reproduction
   - Immune System
   - Neurological System
   - Normal Cell Growth
   - Other: ___________________________

4. Indicate how any major life activity(ies) and/or major bodily function(s) (is)are substantially limited.

C. To date, what accommodations / modifications / interventions or special provisions have been made to assist the student?

   ________________________________  ________________________________  ________________________________
   Signature of Person Making Referral   Relationship to Student   Date

THE SIGNATURE OF THE PRINCIPAL RECEIVING THIS REFERRAL DOCUMENTS THAT A COPY OF THIS FORM AND THE
NOTICE OF SECTION 504/ADA PROCEDURAL INFORMATION AND RIGHTS HAVE BEEN GIVEN OR SENT TO THE
PARENT/GUARDIAN OF THE STUDENT.

   ________________________________  ________________________________
   Principal’s Signature   Date Received

   For Office Use Only

   Copies to:  
   - Case Manager
   - Principal
   - Parent(s)
   - File
   - Other

If the school team finds it necessary to obtain relevant information regarding the student from outside providers, please complete a Authorization to Release/Share Confidential Information (FORM G) and secure parent/legal guardian signature.
SECTION 504
PRIOR WRITTEN NOTICE TO PARENTS

Date: __________________________
Student Name: __________________________________________ Date of Birth: __________________________
Student #: __________________________

This is to notify you of the district's action regarding Kristen's educational program.

1. Description of the action:
   - [ ] Initial 504 Evaluation
   - [ ] Refusal to Initiate a 504 Evaluation
   - [ ] Development of 504 Plan
   - [ ] 504 Plan Review
   - [ ] 504 Reevaluation
   - [ ] Change of 504 Services
   - [ ] 504 Issues/meetings where the parent(s) disagree with the District
   - [ ] Other (describe action taken): __________________________

2. A description of the action proposed or refused by the school district and the reasons for taking the action:

3. A description of each evaluation procedure, assessment, record or report the school district used as a basis for the proposed or refused action:

4. A description of other factors that are relevant to the school district’s proposal or refusal:

Name __________________________________________ Title __________________________
Address __________________________________________ Telephone __________________________
City, State and Zip __________________________ Email __________________________

*Enclosure: Parental Notice of Section 504/ADA Procedural Information and Rights
NOTICE OF SECTION 504 CONFERENCE

Student's Name: ___________________________ Date of Birth: __________________

School: ___________________________ Grade: __________________

Parent/Guardian(s):
Name: ___________________________ Address: __________________

Date: ___________________________ Time: __________________

Location: ___________________________

A. The intended purpose of this meeting (check all that apply):
- [ ] Initial Conference to determine 504 eligibility
- [ ] Develop a 504 accommodation plan and/or other plan as needed
- [ ] Other

B. We expect the following persons to attend the Conference. You have the right to bring others:
- [ ] School Principal
- [ ] Parent/Guardian
- [ ] Classroom Teacher(s)
- [ ] School Psychologist(s)
- [ ] Case Manager
- [ ] Health Aide/Nurse
- [ ] Other:
- [ ] Student
- [ ] School Counselor
- [ ] Interpreter

Principal/Designee Signature: ___________________________ Date: __________________

The evaluation data and other information to be discussed are available for your review prior to this conference.

*Please keep one copy of this Notice and return the other so that we will know your intent.

Enclosed is a copy of the Notice of Section 504/ADA Procedural Information and Rights.

(Parent/Guardian) RESPONSE

Please complete this section, sign and return to school principal by ___________________________ (Date)

I receive the Notice of Section 504 Conference and Notice of Section 504/ADA Procedural Information and Rights in regards to my child ___________________________ (name).

- [ ] I will attend this meeting at the time stated
- [ ] I prefer to participate by telephone. At the time of the Conference, I can be reached at ___________________________
- [ ] I would like to attend this meeting at a different date/time.

Please bring any information, including formal or informal test results, work samples, medical records, etc. to the Conference.
Please indicate if there are additional individuals you will be bringing with you.

List name(s):

______________________________

Parent/Guardian Signature: ___________________________ Date: __________________

Telephone number(s) where you can be reached: ___________________________ Email: __________________
Section 504 Team Participants

THE FOLLOWING PEOPLE ATTENDED AND PARTICIPATED IN THE MEETING TO DEVELOP THIS 504 PLAN

<table>
<thead>
<tr>
<th>POSITION</th>
<th>NAME</th>
<th>SIGNATURE</th>
</tr>
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<tbody>
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</tbody>
</table>

Principal/Designee: ____________________

Section VI: Notice of Procedural Safeguards

I received a copy of the Notice of Section 504/ADA Procedural Information and Rights for the current year:

Parent Signature: ____________________ Date: ____________

Section VII: Consent

☐ I give permission for this Section 504 Plan to be implemented for my child. The information contained in this plan will be distributed to appropriate individuals in the building. Your signature indicates consent to share this plan with necessary staff.

☐ I do not give permission for this Section 504 Plan to be implemented for my child.

Parent Signature: ____________________ Date: ____________

For Office Use Only

Copies to:

______ District 504 Compliance Officer
______ Parent(s)
______ Teacher(s)
______ File
______ 504 Case Manager
______ (other)

Principal
Notice of Parent/Guardian/Student Rights

Below is a description of the rights granted by Federal law to individuals with disabilities. It is the intent of Section 504 of the Rehabilitation Act of 1973 to keep you fully informed concerning decisions about your child and to inform you of your rights if you disagree with any of these decisions.

You have the right to:

a) Have your child take part in, and receive benefits from public education programs without discrimination because of his/her disability.

b) Have the District advise you of your rights under Federal law.

c) Receive notice with respect to identification, evaluation, or placement of your child.

d) Have your child receive a free appropriate public education that consists of regular or special education and related aids and/or services designed to meet the student’s needs as adequately as the needs of nondisabled students are met. This also includes the right to be educated with nondisabled students to the maximum extent appropriate.

e) Have your child educated in facilities and receive services comparable to those provided non-disabled students.

f) Have your child receive special education and related services if s/he is found to be eligible under Individuals with Disabilities Education Improvement Act, and/or regular or special education and related aids and/or services under Section 504.

g) Have evaluation, educational, and placement decisions made based upon a variety of information sources, and by persons who know the student, and are knowledgeable about the evaluation data and placement options, including the child’s parents.

h) Have transportation provided to and from an alternative setting at no greater cost to you than would be incurred if the student were placed in a program operated by the District and not in addition to any cost normally charged to a student without a disability for such transportation.

i) Have your child be given an equal opportunity to participate in nonacademic and extracurricular activities offered by the District.

j) Examine all relevant records relating to decisions regarding your child’s identification, evaluation, education program, and placement.

k) Obtain copies of educational records at a reasonable cost unless the fee would effectively deny you access to the records, the same as for all individuals requesting such records.

l) A response from the District to reasonable requests for explanations and interpretations of your child’s records.

m) Request amendments of your child’s educational records if there is reasonable cause to believe that information contained in the record(s) is inaccurate, misleading or otherwise in violation of the privacy rights of your child. If the District refuses to amend the record(s), you have the right to request a hearing and/or to place in the record a statement of why you disagree with the information it contains.

n) Request mediation or an impartial due process hearing related to decisions or actions regarding your child’s identification, evaluation, educational programs, or placement. You and your child may take part in the hearing and be represented. Hearing requests must be made to the Section 504 Compliance Officer.

o) Receive all information in the parent’s native language and mode of communication.

p) File a local grievance or a complaint with the Office for Civil Rights at any time.
The District’s Section 504 Compliance Officer, the person in the District responsible for assuring that the District complies with Section 504, is:

Wayne J. Belock, Esq.
Section 504 Compliance Officer
Cleveland Metropolitan School District
1111 Superior Avenue East, Suite 1800
Cleveland, Ohio 44114
Phone: (216) 838-0070
E-mail: Wayne.Belock@clevelandmetroschools.org

The Office for Civil Rights of the United States Department of Education enforces the requirements of Section 504 of the Rehabilitation Act of 1973. The address of the Ohio Office is:

Office for Civil Rights, Cleveland Office
U.S. Department of Education
600 Superior Avenue East, Suite 750
Cleveland, Ohio 44114-2611
Telephone: 216.522.4970
Facsimile: 216.522.2573
TDD: 877.521.2172
E-Mail: OCR.Cleveland@ed.gov

THIS NOTICE TO PARENT MUST BE:

☐ Provided to the Parent
☐ A copy placed in student’s permanent educational record
☐ Forwarded to the Section 504 Compliance Officer and Executive Director, Intervention Services
EVALUATION

Section 504 Evaluation Team Report

SECTION 504 EVALUATION

Any student who needs or is believed to need regular or special education and related aids and/or services under the auspices of Section 504 of the Rehabilitation Act of 1973 may be referred to the Section 504 School Team for evaluation.

The Section 504 School Team shall be composed of persons knowledgeable about the student’s school history, the student’s individual needs, the meaning of evaluation data, and options that will enable the student to attain access to educational opportunities.

The student’s parent(s) shall be notified of, and invited to participate in, the Section 504 School Team meeting within a reasonable amount of time (or approximately two (2) weeks) prior to the meeting.

Any tests used for the purpose of qualifying a student under Section 504 shall be selected and administered so as best to ensure that the test results accurately reflect the student’s aptitude or achievement or other factors being measured rather than reflect the student’s disability, except where those are the factors being measured. All evaluation materials must be tailored to evaluate the specific areas of educational need and not merely those designed to provide a single intelligence quotient. The tests and other evaluation materials must be validated for the specific purpose for which they are used and appropriately administered by trained personnel.

The Section 504 School Team shall consider all relevant information on the student to determine whether s/he has a disability under Section 504 from a variety of sources. Information may include reports from outside physicians; observations from parents, teachers, and school personnel; results of standardized tests; and other documents that may have relevance.

Should the Section 504 School Team determine that a student has a disability under Section 504, it will develop a Section 504 Plan (FORM D) describing what accommodations or special education and related aids and/or services are required to meet the student’s individualized needs as adequately as the needs of nondisabled students are met.

The Section 504 School Team shall invite the parent(s)/guardian(s) to participate in the meeting where recommendations are made.

If a plan for providing services is developed, all school personnel who work with the student shall be informed of the plan.

Evaluation of the student and formulation of a plan of services implemented by the Section 504 school team will be implemented according to the following procedures:

An individualized evaluation will be conducted in the native language of the student.

The Section 504 school team will evaluate the nature of the student’s disability and the impact of the disability upon the student’s education. This evaluation will include consideration of any behaviors that interfere with regular participation of a student who otherwise meets the criteria (such as age) for participation in the educational program and/or activities.
The Section 504 School Team, in writing, will make the final decision, and the parent(s) or guardian(s) of the student shall be notified of the Section 504 procedural safeguards available to them, including the right to an impartial due process hearing and review.

**REVIEW/REEVALUATION OF STUDENT'S PROGRESS**

The Section 504 School Team will monitor the effectiveness of the student’s Section 504 Plan periodically and, at a minimum of every three (3) years, conduct a reevaluation. A reevaluation also will be conducted prior to any subsequent significant change in the student’s placement.

**IMPLEMENTATION OF SECTION 504 PLANS**

The identified school staff must implement the provisions of Section 504 plans for those students for whom the teacher is responsible. Failure to implement a Section 504 plan may be considered discrimination on the basis of a disability with potential consequences imposed by the U.S. Department of Education, Office for Civil Rights, and/or an Impartial Hearing Officer.

**REGULAR EDUCATION INTERVENTION PLAN**

A regular education intervention plan is appropriate for a student who does not have a disability or is not suspected of having a disability but may be facing challenges in school. Student Support Teams (SSTs) are designed to provide regular education teachers with support and strategies for helping students in need of various accommodations and assistance. Regular Education Intervention Plans are not policed by the U.S. Department of Education, Office for Civil Rights.

**SECTION 504 PLAN**

The Section 504 School Team will develop a written plan describing the disability and the accommodations or special education and related aids and/or services needed. The plan will specify how the accommodations or special education and related aids and/or services will be provided, and by whom.

The parent(s) or guardian(s) shall be invited to participate in Section 504 School Team meetings where the student’s Section 504 Plan will be developed or modified, and shall be given an opportunity to examine all relevant records.

The team may also determine that no accommodations, special education or related aids and/or services are appropriate at present. If so, the record of the Section 504 School Team proceedings will reflect the determination of the student as a person with or without a qualified disability and will state the basis for the decision that no accommodations, special education or related aids and/or services are needed at this time. If the student is eligible but not presently requiring accommodations, special education or related aids and/or services, possibly due to a disability in remission, the Section 504 school team will provide notice to the parent/guardian to that effect with a plan to convene and implement Section 504 Plan, as necessary.

Even if no accommodations, special education or related aids and/or services are appropriate at this time due to the disability being in remission or the efficacy of auxiliary aides and services, the Section 504 disciplinary protections would still apply to the student. In addition to the disciplinary protections, the
student is also covered by the nondiscrimination provisions of Section 504, which includes being protected from harassment based on disability, as well as Section 504’s retaliation prohibition.

A qualified student with a disability under Section 504 shall be placed in the regular educational environment within the District, with the use of related aids and/or services, unless the District demonstrates that such placement cannot be achieved appropriately. The student with a qualified disability shall be educated with those students who are not disabled to the maximum extent appropriate based on the individual needs of the student.
Cleveland Municipal School District
Cleveland, Ohio

SECTION 504 ELIGIBILITY DETERMINATION
SUMMARY EVALUATION REPORT

☐ Initial Section 504 Evaluation  ☐ Section 504 Reevaluation  ☐ Section 504 Evaluation Amendment

Student Name: ___________________________ Eligibility Determination Date: ________
Student #: __________ Date of Birth: __________

Parent Name(s) _______________________________________________________________________

Address: ___________________________________________________________________________

Communications:

Teacher: ___________ School: ___________________________
Initially referred by: ___________ Grade: ___________

The Section 504 Team met on ________ (date). The Notice of Section 504/ADA Procedural Information and Rights was presented with explanation by ________

Sources of Information Considered by the Section 504 Team in Determining Eligibility:
- ☐ Parent Recommendation
- ☐ Educational Evaluation/Performance
- ☐ Teacher Observation/Recommendation
- ☐ Ineligibility for Services under IDEA

☐ Yes ☐ No

☐ Muscular Dystrophy
☐ Orthopedic
☐ Recovering Dependent
☐ Seizures
☐ Speech Impairment
☐ Visual Impairment
☐ Other: ______

Summary of data and evaluation information that was presented:

Section 504 Team Determinations:

1. The student has a physical or mental impairment. ☐ Yes ☐ No

☐ Asthma  ☐ Dyslexia  ☐ Muscular Dystrophy
☐ Attention Deficit Disorder/ADHD  ☐ Emergent Allergy  ☐ Orthopedic
☐ Brain Injury  ☐ Emotional Illness  ☐ Recovering Dependent
☐ Cancer  ☐ Epilepsy  ☐ Seizures
☐ Cerebral Palsy  ☐ Hearing Impairment  ☐ Speech Impairment
☐ Developmental Aphasia  ☐ Heart Disease  ☐ Visual Impairment
☐ Diabetes  ☐ Minimal Brain Dysfunction  ☐ Other: ______
☐ Aphasia  ☐ Multiple Sclerosis

List attached sources of documentation:

2. If student has a physical or mental impairment in #1 above, does the impairment result in a substantial limitation of one or more major life activity(ies)?

☐ Yes ☐ No

Summarize the impairment for each condition identified in Section 1 in relation to the average student:

3. Identify any major life activities or major bodily functions that are substantially limited.
Child's Name: ___________________________ Student ID: _____________ Date of Meeting: ____________

a. Circle any major life activities that are substantially limited:
- [ ] Bending
- [ ] Breathing
- [ ] Caring for one's self
- [ ] Communicating
- [ ] Concentrating
- [ ] Eating
- [ ] Hearing
- [ ] Learning
- [ ] Lifting
- [ ] Performing manual tasks
- [ ] Reading
- [ ] Seeing
- [ ] Sleeping
- [ ] Speaking
- [ ] Standing
- [ ] Thinking
- [ ] Walking
- [ ] Working
- [ ] Other: ____________________________

b. Circle any major bodily functions that are substantially limited:
- [ ] Bladder
- [ ] Bowel
- [ ] Brain
- [ ] Circulatory/Cardiovascular System
- [ ] Digestive System
- [ ] Endocrine System
- [ ] Immune System
- [ ] Neurological System
- [ ] Normal Cell Growth
- [ ] Respiratory System
- [ ] Reproduction
- [ ] Other: ____________________________

Determinations:
- [ ] The student is eligible under Section 504/ADA as a student with disability for the following conditions.

Does this student need regular or special education and related aids and services, including but not limited to, accommodations / modifications / interventions?
- [ ] No
  Explain:
- [ ] Yes
  Indicate the type of plan to be written:

- [ ] The student is not eligible under Section 504/ADA as a person with a disability.
  Does this student nevertheless need accommodations/modifications/interventions?
- [ ] No
  Explain:
- [ ] Yes
  Indicate the type of plan to be written:

INITIAL SECTION 504 TEAM DETERMINATION:
- [ ] A Section 504 Plan is recommended.
- [ ] A Section 504 Plan is NOT recommended. The student does not have a physical or mental impairment that substantially limits a major life activity and therefore does not qualify for a 504 plan.
- [ ] A Section 504 Plan is NOT recommended. The student does have a physical or mental impairment, but it does not substantially limits a major life activity; therefore, the student does not qualify for a 504 plan.
- [ ] The student has an impairment that substantially limits a major life activity, but does not require a Section 504 Plan.
  (Explain: ____________________________)
- [ ] Other

Section 504 Team Participants

<table>
<thead>
<tr>
<th>POSITION</th>
<th>NAME</th>
<th>SIGNATURE</th>
</tr>
</thead>
</table>

504 Evaluation Report
Child's Name: ___________________________ Student ID: ___________ Date of Meeting: ___________

Acknowledgment:

______ I received a copy of the Notice of Section 504/ADA Procedural Information and Rights for the current year.

______ I agree with the Section 504 Team's recommendations as stated above.

______ I disagree with the Section 504 Team's recommendations as stated above.

*(Please attach a sheet outlining those areas of the recommendations with which you disagree.)

Parent/Guardian Signature ___________________________ Date ______________

For Office Use Only

Copies to:

______ District 504 Compliance Officer ___________________________ (other)

______ Parent(s) _________ Student Files _________ Principal
Cleveland Municipal School District
Cleveland, Ohio

Section 504 Plan

"CONFIDENTIAL"

☐ Initial Section 504 Plan  ☐ Continuing Section 504 Plan  ☐ Section 504 Amendment

The student covered under this Plan is a student with a disability. The accommodations/modifications/interventions listed on this Plan comply with the ADA Amendment Act of 2008 and the Rehabilitation Act of 1973 (Section 504).

SECTION I:
Student Name: ________________ Date of Birth: __________ Date of Plan: __________
Address: __________________________________ Phone #: __________________
Student #: ______ Grade: _____ Building: ________________

Parent Name(s) ____________________________________________
Address: __________________________________________________
Communications: __________________________________________

SECTION II:  What physical or mental impairment has the team identified?

DIAGNOSIS (if applicable): Date of Diagnosis: ______ Physician: _____________ Medication: _____________

BACKGROUND INFORMATION: Please attach pertinent educational and additional medical information:

SECTION III: List the major life activities or major bodily functions that are substantially limited as a result of the above stated mental or physical impairment:

<table>
<thead>
<tr>
<th>Substantial Limitation (i.e., concern or problem to be addressed)</th>
<th>Intervention/Strategy/Services (i.e., accommodation / modification / intervention)</th>
<th>Person(s) Responsible</th>
<th>Evaluation Procedure</th>
<th>Comments</th>
</tr>
</thead>
</table>

SECTION IV:
Testing Accommodations Needed?  ☐ Yes  ☐ No

<table>
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<tr>
<th>AREA</th>
<th>GRADE</th>
<th>CHILDREN WILL BE TESTED:</th>
<th>DETAIL OF ACCOMMODATIONS</th>
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<tbody>
<tr>
<td>Reading</td>
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<td>☐ WITH ACCOMMODATIONS</td>
<td></td>
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<tr>
<td>Writing</td>
<td></td>
<td>☐ WITH ACCOMMODATIONS</td>
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<td>Math</td>
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<td>☐ WITH ACCOMMODATIONS</td>
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<td>Science</td>
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<td>☐ WITH ACCOMMODATIONS</td>
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<tr>
<td>Social Studies</td>
<td></td>
<td>☐ WITH ACCOMMODATIONS</td>
<td></td>
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<tr>
<td>Other</td>
<td></td>
<td>☐ WITH ACCOMMODATIONS</td>
<td></td>
</tr>
</tbody>
</table>

Attachment ☐ Yes ☐ No
If Yes, List documents attached:

SECTION V: Participants

504 Accommodation Plan

Page 1
Section 504 Team Participants

THE FOLLOWING PEOPLE ATTENDED AND PARTICIPATED IN THE MEETING TO DEVELOP THIS 504 PLAN

<table>
<thead>
<tr>
<th>POSITION</th>
<th>NAME</th>
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Principal/Designee: ____________________________

Section VI: Notice of Procedural Safeguards

I received a copy of the Notice of Section 504/ADA Procedural Information and Rights for the current year:

__________________________
Parent Signature

__________________________
Date

Section VII: Consent

☐ I give permission for this Section 504 Plan to be implemented for my child. The information contained in this plan will be distributed to appropriate individuals in the building. Your signature indicates consent to share this plan with necessary staff.

☐ I do not give permission for this Section 504 Plan to be implemented for my child.

__________________________
Parent Signature

__________________________
Date

For Office Use Only

Copies to:

District 504 Compliance Officer

Principal

Teacher(s)

Parent(s)

504 Case Manager

File

(或者其他)
Cleveland Municipal School District
Cleveland, Ohio

SECTION 504 EVALUATION/MANIFESTATION DETERMINATION REVIEW

Student's Name:  
ID #:  
Grade:  
DOB:  
Principal, 504 Coordinator:  
Date of Manifestation Determination Review:

Upon consideration of a change of placement due to discipline, the Section 504 Team must conduct an evaluation including review of pertinent information from a variety of sources, to determine whether the child's disability was directly related to the code of conduct violation.

Nature of behavior subject to disciplinary action:

Upon completion of the evaluation:

1. Did the 504 Team review relevant information in the student’s file?  □ Yes □ No
   Please Specify:

2. Did the 504 school team review the student's current 504 Plan?  □ Yes □ No

3. Did the 504 school team consider information provided by parent/legal guardian?  □ Yes □ No

4. Did the 504 school team determine that the conduct in question was caused by or had a direct relationship to the child’s disability?  □ Yes □ No
   *If yes, and student is not currently on a Section 504 plan, the school team should consider developing a Section 504 plan to address the student’s current needs.

5. Was the child’s conduct a direct result of the district’s failure to implement the 504 Plan?  □ Yes □ No

Based upon review of all relevant information and in consideration of the specifics of the code of conduct violation, the 504 Team has determined that the behavior subject to disciplinary action:

□ Was □ Was Not  a manifestation of the student’s disability.

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504 Manifestation Determination  
Page 1 of 1
COMPLAINT PROCEDURES

Complaint Filing Form

General Statement

The District strives to provide an environment free from discrimination. The District encourages students, parents and staff to identify barriers to a discrimination-free and an appropriate learning environment in the school(s). The purpose of the Complaint Filing Form is to address complaints of disability discrimination under Section 504 and Title II. All complaints will be received and investigated in a fair and expeditious manner. The District will take affirmative steps to address and correct any substantiated finding of discrimination.

This policy does not deny the right of the complaining party to file formal complaints at any time with the U.S. Department of Education, Office for Civil Rights or to seek private counsel for complaints alleging discrimination.

Steps to Resolution

Step 1: Principal or Immediate Supervisor (Informal and optional--may be bypassed by complaining party)

An informal meeting with the parties and the principal or the Compliance Officer can solve many problems. An individual with a complaint is encouraged to first discuss it with the teacher, counselor, or building administrator involved with the objective of resolving the matter promptly and informally. Employees with a complaint are encouraged to first discuss it with their principal or immediate supervisor with the same objective.

Step 2: Section 504 Compliance Officer

If the complaint or issue is not resolved at Step 1, or if the complainant does not wish to use the informal procedures set forth in Step 1, the complaining party may file a written complaint (FORM F) stating: 1) the nature of the complaint; and 2) the remedy requested. The complaining party must sign and date the complaint. The written complaint must be filed with the building’s Section 504 coordinator within thirty (30) days of the event or incident, or from the date the complaining party could reasonably become aware of such occurrence.

Responsibility of the Section 504 Compliance Officer

The Section 504 Compliance Officer is appointed by the Board and is personally responsible for Section 504 compliance throughout the District. The Section 504 Compliance Officer has the authority to investigate all written grievances and to issue corrective actions to address non-compliance with federal law. The Section 504 Compliance Officer will prepare a written report of all investigations, which shall include the following:

- A clear statement of the allegations of the complaint and the remedy sought by the grieving party.
- A statement of the facts as contended by each of the parties.
• A statement of the facts as found by the Section 504 Compliance Officer and identification of evidence to support each fact.

• A list of all witnesses interviewed and documents reviewed during the investigation.

• A narrative describing attempts to resolve the complaint.

• The Section 504 Compliance Officer’s determination as to whether the allegations in the complaint are meritorious.

The Section 504 Compliance Officer will complete the investigation and issue a final decision and report within forty-five (45) days after receipt of the written complaint. The District will take appropriate corrective action to address any substantiated finding(s) of discrimination noted in the final decision and report of the Section 504 Compliance Officer. The Section 504 Compliance Officer will send a copy of the final decision and report to the complaining party within the forty-five (45) day period. If the Section 504 Compliance Officer believes the complaint is valid, the final decision and report issued by the Section 504 Compliance Officer will include recommendations for appropriate corrective actions to be taken by the District.

Other Options of the Complaining Party

At any time during this process, the complaining party may file a complaint with the U.S. Department of Education, Office for Civil Rights.
Section 504 Complaint Filing Form

Date _____/_____/_____

Child’s Name ______________________________ D.O.B. ______________________________

Address ___________________________________ School _______________________________

Parent’s Name (print) __________________________________________________________________

Home Phone ___________________ Cell Phone _________________ Work _______________

Telephone Number ______________________ Email __________________________________

Nature of your complaint. (Please describe the policy or action you believe may be in violation of Section 504. Please also identify any person(s) you believe may be responsible.)
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Please provide your proposed remedy to this alleged violation:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

___________________________________________       _____/_____/______
Signature of Complaining Party Date

____________________________________________
Signature of Person Receiving Complaint

_____/_____/_____   ___________________________________________
Date  Location

THIS FORM SHOULD BE FORWARDED WITHIN THIRTY (30) DAYS OF THE ALLEGED VIOLATION OF THE PROCEDURAL SAFEGUARDS TO:

Section 504 Compliance Officer: Wayne J. Belock, Esq.
Section 504 Compliance Officer
Cleveland Metropolitan School District
1111 Superior Avenue East, Suite 1800
Cleveland, Ohio 44114
Phone: (216) 838-0070
E-mail: Wayne.Belock@clevelandmetroschools.org
MEDIATIONS AND HEARING PROCEDURES

SECTION 504 MEDIATION AND HEARING PROCEDURES

Mediation procedures for Section 504 are not intended to delay or hinder the parent/legal guardian’s right to a hearing. Rather, they are intended to assist the parent/legal guardian in resolving differences and in obtaining a free appropriate public education for their child.

When the parent/legal guardian does not agree with the Section 504 evaluation findings and/or the Section 504 Plan, the following may occur:

1. The school principal arranges a conference that includes the parent/legal guardian, the classroom teacher(s), and/or participants as needed. The parent/legal guardian is given a copy of the Section 504 Procedural Safeguards. If the parent/legal guardian is non-English speaking, an interpreter is provided.

2. The school principal conducts the conference and an informal resolution of differences is sought.
   (a) The school principal explains to the parent/legal guardian that this process does not interfere with his/her right to file a formal complaint.
   (b) The school principal/designee summarizes the results of the conference in writing, sends copies to the parent/legal guardian and places copies in the student’s permanent educational file.

Due Process Procedures

The procedures for Section 504 due process hearings ensure that:

1. A parent/legal guardian or the school district may initiate a hearing on matters dealing with identification, evaluation or the provision of a free appropriate public education.
2. The district may initiate a hearing to override a parent’s refusal or revocation of consent for a Section 504 evaluation.
3. Parents will receive timely notice of the date and time of the hearing, which shall be mutually convenient.
4. The hearing officer will be selected by the District
5. The hearing officer shall not be:
   a. Employed by an agency involved with the care or education of the student subject to the hearing.
   b. A person having a professional or personal interest that would conflict with his/her objectivity in a hearing.
Due Process Hearing Rights and Procedures

The parties to a Section 504 Due Process Hearing have a right to:

1. Be accompanied and advised by an attorney or representative

2. Have the assistance of an interpreter (if the parent’s natural language is not English and given adequate notice to the District)

3. Present evidence and examine witnesses

4. The hearing officer shall render a decision, subject to judicial review that is binding on all parties, except that in all cases any action taken must comply with the current Ohio Revised Code and federal court decisions.

5. The party initiating the due process hearing will bear the burden of proof.

6. Parents or the District may initiate a due process hearing on a matter related to (1) eligibility and related procedures, (2) procedural safeguards, or (3) provision of a free and appropriate public education to the student.

7. Requests for a due process hearing must be submitted in writing to the Chief Executive Officer (or designee).

8. The request shall include:
   - The name of the student
   - The name of the parent or legal guardian
   - The address and telephone number of the legal guardian
   - The name of the school the child attends
   - A statement of the issues to be presented at the hearing.
   - A statement of the remedy requested of the hearing officer.

Decision of the Hearing Officer

The hearing officer shall review all relevant facts and render a decision.

A copy of the hearing officer’s decision shall be delivered to the District and the parent/legal guardian within forty-five (45) days from the date of the hearing.

Notification will include a statement that either party may appeal the decision to a district court of competent jurisdiction.
CONSENT FOR SECTION 504 EVALUATION &
NOTICE OF SECTION 504/ADA PROCEDURAL INFORMATION AND RIGHTS

Date: __________

Student Name: ___________________________ Date of Birth: __________ Age: __________

School: ___________________________ Grade: __________

Parent Name(s) ___________________________

Address: ___________________________________________

Communications:
Your Child has been referred for an evaluation to determine eligibility for protection under the Section 504 of the Rehabilitation Act of 1973 (as amended) and/or the Americans with Disabilities Act (ADA) (as amended). A copy of the Board of Education's Section 504/ADA Policy and Administrative Guidelines is available to you by contacting your building principal or the District's Compliance Officer. A copy of the Notice of Section 504/ADA Procedural Information and Rights is enclosed.

For Office Use Only

Date Sent: ____________ Principal's/Designee's Initials: __________________________

Your signed consent is required to complete this screening/evaluation. The results will be communicated to you and appropriate school personnel. All results are confidential in accordance with State and Federal laws pertaining to education and/or health records. The school will obtain and review information from a variety of sources in order to make a proper evaluation of your child's condition. The evaluation will be completed within approximately sixty (60) calendar days.

PARENT CONSENT

As parent/guardian:  
☐ I DO consent to this evaluation. *
☐ I DO NOT consent to this evaluation.

* Consent may be revoked at any time.

Parent/Guardian Signature: ___________________________ Date: ____________

Form C
AUTHORIZATION TO
RELEASE/SHARE CONFIDENTIAL
INFORMATION

I, (Name of Parent)

____________________________________
___ hereby authorize (Name of School
District)

____________________________________
___ and (Name of Provider)

_______________________________

___ to release and share educational
records/information related to my child
____________________________________, (D.O.B.)

_______________________________.

This Authorization permits the sharing of
personally identifiable information between
the above-named parties. The records
authorized to be disclosed include:

☐ Attendance records
  ☐ Standardized/group testing
☐ Classroom observations
  ☐ Evaluation Team Reports (ETRs)
☐ Classroom testing & work samples
  ☐ Individualized Education
Programs (IEPs)
☐ Course history reports
  ☐ Expulsion notices
☐ Grade reports/Transcripts
  ☐ Office referrals
☐ Interim progress reports
  ☐ Suspension notices
☐ Section 504 plans
  ☐ School health records
☐ Other necessary information below
  ☐ Immunizations records

I understand that information provided
between the above-named parties will be
used solely for the purpose of making
educational decisions on behalf of my child.
I further understand that I can revoke this
authorization at any time by providing a
written request to (title)
____________________________________,
(name)
_______________________________ at
(address and phone
number)_____________________________. Otherwise, this
authorization is valid for 180 days from the
date of my signature below.

I understand that I have a right to receive a
copy of this Authorization, and that any
modification or revocation of this
Authorization must be in writing.

Signature:

_______________________________
___ Date: ______________________

Relationship to Child:

_______________________________

cc: Student permanent education file
Parent/Guardian