



**SEATTLE SCHOOL DISTRICT
SECTION 504 STUDENT REFERRAL FORM
(FORM 504-3)**

Student Name _____ Date _____
Student ID # _____ Birth Date _____
School _____ Grade: _____
Address _____ City _____ State/Zip _____
Parent(s) Name(s) _____
Home Phone _____ Work Phone _____
Building 504 Coordinator _____ Phone _____

The Seattle School District does not discriminate on the basis of disability in its admission procedures, access to educational services, or treatment of students in its programs, services, and activities. Any student, parent or guardian, who believes the student has a disability that could affect their education, and who believes that the impact of the disability might be alleviated by some services, modifications, and/or accommodations from the District, may refer the student to the School's School Intervention Team (SIT) for consideration. If that disability meets the definition of Section 504 of the Rehabilitation Act of 1973, the District will offer assistance.

For a student to be eligible for a 504 plan, the student must meet all three of the following criteria. It must be because of the disability that the student is unable to gain equal access and benefit from school programs and services.

- The student has a physical or mental impairment
- That **substantially** limits
- One or more major life activities

INSTRUCTIONS: If you believe that a student may be eligible for Section 504 support please complete and sign the following form giving specific details about why you are requesting a Section 504 evaluation and submit it along with supporting documentation to your school's principal or 504 coordinator.

Please describe the student concern and how it matches the above criteria (identify the physical or mental impairment and identify how it substantially limits a major life activity(ies)). (Attach additional sheets if necessary)

Signature of person requesting Section 504 review _____
Relation to student _____