

New Prague Area Schools

Independent School District No. 721

Website: www.np.k12.mn.us



415 1st Avenue Northwest New Prague, MN 56071
Office of Special Services

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Form 5 – Appendix Section 504 Referral Checklist

Student Name: _____

Check (X) for each step as it is completed. Indicate the date of completion and person initiating action.

Completion (X)	Task	Date Completed	Initials of Person Completing Task
	1. The Section 504 Referral Form is completed and submitted to the Building 504 Coordinator. (placed in cumulative file)		
	2. The parent/guardian is given the:		
	a. Notice of Proposed Evaluation		
	b. Notice of Procedural Safeguards		
	c. A copy of the completed Section 504 Referral Form.		
	3. Written parental permission to conduct the evaluation is received by the Building 504 Coordinator.		
	4. The Building 504 Coordinator notifies appropriate staff members and/or others to conduct the Section 504 evaluation.		
	5. The Building 504 Coordinator notifies the evaluation team members (including the parent/guardian) of the meeting date, time and place to discuss evaluation results and possible 504 services.		
	6. The Invitation to Section 504 Evaluation Meeting is sent to the parent/legal guardian.		
	7. If the child is determined to be disabled under Section 504, a Section 504 education plan is written by the meeting participants.		
	8. Following the Section 504 meeting, the building 504 Coordinator:		
	a. Places all information in the student's cumulative file.		
	b. Notifies all relevant district staff regarding the content of the 504 plan and any accommodations that must be provided in the classroom.		
	c. Notifies MARRS Secretary – enter into MARRS		