**TAZEWELL-MASON COUNTIES**

**SPECIAL EDUCATION ASSOCIATION**

**PARENTAL NOTICE OF**

**SECTION 504 CONFERENCE**

Dear Parent(s)/Guardian(s):

This letter is to make you aware of the need to review your child’s educational program and/or to meet to consider the existence of a disability based on the definition in Section 504 of the *Rehabilitation Act of 1973*. We are planning a conference as follows: you are cordially requested to attend a Section 504 conference regarding:

Student’s Name:

Date of birth:

School Name:

Meeting location: Meeting date/time:

The purpose of this conference will be to:

\_\_\_\_\_ discuss a referral on your child for possible Section 504 eligibility.

\_\_\_\_\_ consider your student’s eligibility under Section 504 of the *Rehabilitation Act of 1973*.

\_\_\_\_\_ develop a Section 504 Plan for your student.

\_\_\_\_\_ review your student’s re-evaluation and eligibility under Section 504.

\_\_\_\_\_ review and revise your student’s existing Section 504 Plan.

\_\_\_\_\_ conduct a manifestation determination review.

\_\_\_\_\_ other

The following persons have been invited to attend this meeting:

 Name Title

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Section 504 Coordinator) (Date) (Telephone Number)

We strongly encourage you to attend and participate in this meeting. You have the right to bring other individuals at your discretion. Please notify me as soon as possible if you require an interpreter or translator, or if you intend to bring anyone else, including an attorney, or if you have any questions regarding the meeting.

I also wish to remind you of your right to review your child’s school records upon reasonable notice. You may request a records review by contacting me.

Enclosed with this notice is a copy of your procedural safeguards under Section 504. If you have any questions regarding your rights under Section 504, please contact our Section 504 Coordinator, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.