

**Kenai Peninsula Borough School District
148 N. Binkley Soldotna, AK 99669
504 Eligibility Determination**

Student ID:

Meeting Date:

Name:

Parent 1:

Birthdate:

Grade:

Parent 2:

School:

School Contact Person:

Position: 504 Site Coordinator

Eligibility Team Members (For each member, check whether s/he is knowledgeable about the child, the meaning of evaluation data, and/or accommodations/placement options.)

| <u>Knowledgeable About:</u> | <u>Child</u> | <u>Meaning of Evaluation Data</u> | <u>Accommodations & Placement Options</u> |
|-----------------------------|--------------|-----------------------------------|---|
|-----------------------------|--------------|-----------------------------------|---|

| | | |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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Sources of Evaluation Information (check each one used)

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> achievement tests | <input type="checkbox"/> medical/psychological report | <input type="checkbox"/> parent input |
| <input type="checkbox"/> adaptive behavior | <input type="checkbox"/> student work samples | <input type="checkbox"/> other... |
| <input type="checkbox"/> cognitive assessments | <input type="checkbox"/> teacher recommendations/observations | |

1. Specify the mental or physical impairment:

2. Check the major life activity(ies) affected by the impairment:

- | | | | | |
|----------------------------------|-----------------------------------|---|------------------------------------|--|
| <input type="checkbox"/> seeing | <input type="checkbox"/> hearing | <input type="checkbox"/> caring for oneself | <input type="checkbox"/> breathing | <input type="checkbox"/> concentrating |
| <input type="checkbox"/> walking | <input type="checkbox"/> learning | <input type="checkbox"/> manual tasks | <input type="checkbox"/> working | <input type="checkbox"/> other... |

3. The term "substantially limits" means that the student is:

a. unable to perform a major life activity that the average student of approximately the same age can perform;

OR

b. significantly restricted as to the condition, manner or duration under which a particular life activity is performed as compared to the average student of approximately the same age. The impairment must be substantial and somewhat unique, rather than commonplace, when compared to the average student of approximately the same age.

On the following scale, select the specific degree to which the impairment limits the major life activity(ies) in #2 above. Provide specific information evaluated by the team that justifies the rating.

- | | |
|--|--------------------------------|
| <input type="checkbox"/> 5 - Extremely | Information Justifying Rating: |
| <input type="checkbox"/> 4 - Substantially | |
| <input type="checkbox"/> 3 - Moderately | |
| <input type="checkbox"/> 2 - Mildly | |
| <input type="checkbox"/> 1 - Negligibly | |

cc: Parents

Student 504 file

Director Pupil Services

Eligibility Determination

Page 1

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- The team's determination was less than "4"; the student is not eligible for Section 504 protections.
Provide notice to parents of their procedural rights, including an impartial hearing.
- The team's determination was "4" or above; The team should determine and list on the 504 Accommodation Plan the specific accommodations that are necessary for the student to have an opportunity commensurate with non-disabled students of approximately the same age.

I have participated in determining 's eligibility under Section 504.

| <u>Participant's Name</u> | <u>Title</u> | <u>Participant's Signature</u> |
|---------------------------|--------------|--------------------------------|
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- Parent provided a copy of the Section 504 Parental Rights