



Notice of Parent and Student Rights Under Section 504

Section 504 of the Rehabilitation Act of 1973, commonly referred to as “Section 504,” is a nondiscrimination statute enacted by the United States Congress. The purpose of Section 504 is to prohibit discrimination and to assure that disabled students have educational opportunities and benefits equal to those provided to non-disabled students.

An eligible student under Section 504 is a student who has a **physical or mental impairment that substantially limits one or more major life activities**, has a record of such impairment, or is regarded as having such impairment.

The implementing regulations for Section 504 as set out in 34 CFR Part 104, provide parents and/or students with the following rights:

1. Your child has the right to an appropriate education designed to meet his or her individual educational needs as adequately as the needs of non-disabled students.
2. Your child has the right to free educational services except for those fees that are imposed on non-disabled students or their parents. Insurers and similar third parties who provide services not operated by or provided by the recipient are not relieved from an otherwise valid obligation to provide or pay for services provided to a disabled student.
3. Your child has a right to participate in an educational setting (academic and non-academic) with non-disabled students to the maximum extent appropriate to his or her needs.
4. Your child has a right to facilities, services, and activities that are comparable to those provided for non-disabled students.
5. Your child has a right to an evaluation prior to a Section 504 determination of eligibility.
6. You have the right to not consent to the school system’s request to evaluate your child.
7. You have the right to ensure that evaluation procedures, which may include testing, conform to the requirements of 34 CFR 104.35.
8. You have the right to ensure that the school system will consider information from a variety of sources as appropriate, which may include aptitude and achievement tests, grades, teacher recommendations and observations, physical conditions, social or cultural background, medical records, and parental recommendations.

9. You have the right to ensure that placement decisions are made by a group of persons, including persons knowledgeable about:
 - your child,
 - the meaning of the evaluation data,
 - the placement options, and
 - the legal requirements for the least restrictive environment and comparable facilities.
10. If your child is eligible under Section 504, your child has a right to periodic reevaluations, including prior to any subsequent significant change of placement.
11. You have the right to notice prior to any actions by the school system regarding the identification, evaluation, or placement of your child.
12. You have the right to examine your child's educational records.
13. You have the right to an impartial hearing with respect to the school system's actions regarding your child's identification, evaluation, or educational placement, with opportunity for parental participation in the hearing and representation by an attorney.
14. You have the right to receive a copy of this notice and a copy of the school system's impartial hearing procedure upon request.
15. If you disagree with the decision of the impartial hearing officer, you have a right to a review of that decision according to the school system's impartial hearing procedure.
16. You have the right to, at any time, file a complaint with the United States Department of Education's Office for Civil Rights.

If you have questions, need additional assistance, or want more information regarding Section 504, please contact the 504 Coordinator

REQUEST FOR A SECTION 504 DUE PROCESS HEARING

Student's Full Name: _____ Date of Birth: _____

Student's Address: _____

School Student Attends: _____

Parent or Guardian's Full Name: _____

Parent or Guardian's Address: _____

Parent or Guardian's Phone Number: _____

I am requesting that a Section 504 Due Process Hearing be scheduled regarding the following issues (please check a box and detail the particular issues involved on the lines provided:

Section 504 identification – _____

Section 504 evaluation – _____

Section 504 placement - _____

I declare that the foregoing is true and correct to the best of my knowledge after reasonable diligent inquiry.

Parent/Guardian/Authorized Representative Signature

Date

Return this form by E-mail: 504Coordinator@davenportschools.org

Or mail to: 504 Coordinator
Davenport Community School District
1702 N Main St
Davenport, IA 52803