

North Clackamas School District

504 STUDENT ACCOMMODATION PLAN

Date of Plan 2/18/2013 Case Manager Stacy Rich School Morris Elementary
Student Logan Alexia ID# 948922 DOB 01/10/2004 Grade 3rd school
Parent/Legal Guardian Mary Alexia Home Phone 503- Work Phone 964-9406

Participants at Meeting:

Table with 4 columns: Name, Position, Name, Position. Includes Mary Alexia (Parent), Stacy Rich (Case Manager), Logan Alexia (Student), Dhara Sheth (School Staff Member), and Rita Well (Class teacher).

Describe nature of concern: Logan is diagnosed with ADHD and is under medication. He gets distracted in class during reading time that impacts his work especially on test. He also struggles particularly while reading aloud and this is his pattern through kindergarten.

Identify the basis for determining disability (if any): Logan's performance for reading test is low, shows signs of anxiety while reading loud gets distracted. This could be regarded as an early sign of at-risk on a consistent basis.

Describe the effects of the disability on student's education: Logan is on-off with medication which can have impact on him. His self-esteem around reading is suffering. Peer relations during reading are affected - impact to reading fluency, standardized test.

4. Describe any special education, related services and reasonable accommodations that are necessary.

- a. Logan can do Dibbols test with one adult in room
b. Logan check-in with teacher/buddy before going for reading.
c. A consistent reinforcement plan for L in school & home.
d. Logan can be provided 2 5-min breaks in the 90 min session.
e. Logan referred for testing for LD (reading)
f. Logan getting opportunities to engage in physical activity

5. Check any supplemental aides to be provided (if any):

- (x) Tutoring ( ) Support Group ( ) Transportation
( ) Counseling ( ) Home Teacher (x) Behavior Contract
(x) Modified Schedule ( ) Modified Assignments ( ) Related Services
(x) Other Engaging in reading class for younger kids.

Green job

or teacher helps the class for 2-3 deep breathing before beginning reading

**COBB COUNTY SCHOOL DISTRICT**  
**Section 504 Eligibility Form**

Student's Name: \_\_\_\_\_ DOB \_\_\_\_\_ School \_\_\_\_\_ Date \_\_\_\_\_ Parent Rights Given? \_\_\_\_\_  
 Signatures of Eligibility Team Members: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Sources of Information to Be Considered in Determining Eligibility:

<input type="checkbox"/> Parent Recommendation	<input type="checkbox"/> Major Health Problem	<input type="checkbox"/> Other (Explain) _____ _____
<input type="checkbox"/> Physician Diagnosis	<input type="checkbox"/> Teacher Recommendation	
<input type="checkbox"/> Educational Evaluation/Performance	<input type="checkbox"/> Behavioral Evaluation/Performance	
<input type="checkbox"/> Tracking through SST	<input type="checkbox"/> Ineligible for Services under IDEA	

Specific Mental or Physical Impairment: \_\_\_\_\_  
 Considerations for Determination of Eligibility: \_\_\_\_\_

Major Life Activity	School-Related Description of Impairment	Severity 1-Mild 5-Severe	Duration 1-Short Term 5-Long Term	Substantial Limitation? Yes or No
Caring for Oneself		/		
Performing Manual Tasks		/		
Walking		/		
Seeing		/		
Hearing		/		
Speaking		/		
Breathing		/		
Learning				
Working				
Other				

**Based upon the above criteria, this student DOES MEET or DOES NOT MEET eligibility criteria for a 504 Plan.**

**COBB COUNTY SCHOOL DISTRICT**  
**Section 504 Plan**

Student's Name: \_\_\_\_\_ DOB \_\_\_\_\_ School \_\_\_\_\_ Date \_\_\_\_\_  
Parent Rights Given? \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

Location(s) of the implementation of this plan: \_\_\_\_\_

How will teachers and staff be made aware of this plan? \_\_\_\_\_

How will this plan be monitored? \_\_\_\_\_

Review/Reassessment date: \_\_\_\_\_

I have participated in the development of this plan and have received a copy of my rights under Section 504.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_