SECTION 504 NOTIFICATION TO PARENTS THAT STUDENT IS ELIGIBLE

ALBEMARLE COUNTY PUBLIC SCHOOLS
DEPARTMENT OF SPECIAL SERVICES
401 McINTIRE ROAD
CHARLOTTESVILLE, VIRGINIA 22902
(434) 296-5885

Date: _____

Student: _____

DOB: _____

School: _____

Dear Parent(s)/Guardian(s):

An eligibility meeting was conducted on _____ (date) to review the results of the Section 504 assessment that recently was completed for your child. After careful consideration and discussion of the information available, the committee determined that a disabling condition does exist which requires special services under Section 504.

A Section 504 Plan Committee will be held on _____ (Date) at _____ (Time) in _____ (Location).

The following individuals will be in attendance:

_____

_____

_____

Sincerely,

_____

Principal/Designee

Enclosure; (1) Parental Rights: Section 504

Form No. 90.05(a) - 01/02