



Section 504 Teacher Input Form

Student Name: _____ Teacher Name: _____

MS/HS Subject: _____

Grade: _____ Due Date: _____

This student is being evaluated (re-evaluated) for eligibility for Section 504. The information you provide will be used as part of this process and will be shared with the parent.

1. What is the student's current grade in your class (HS/MS) or in each subject (Elem.)?
2. Please check all the factors that may account for the student's current grade
☐ Missing assignments
☐ Late assignments
☐ Incomplete assignments
☐ Failure to participate in class
☐ Lack of skills or background knowledge
☐ Other (Please describe)
3. What strengths does this student display in your classroom?
4. What challenges does this student present in your classroom?
5. Have you made any informal accommodations or modifications for this student such as extending timelines, preferential seating, or adjusting expectations? *(If yes please list below and tell whether or not it was effective.)*
6. Have you been in contact with this parent/guardian during the current school year? How often and what has been your primary means of communication *(email, phone, conference)?*

Any additional information or comments? *(Please use additional pages as necessary.)*