



**SECTION 1 – STUDENT INFORMATION**

\_\_\_\_\_  
**Student Name** **GTID** **Birthdate**

\_\_\_\_\_  
**School** **Grade** **Date**

\_\_\_\_\_  
**Parent/Guardian** **Name of Referring Source**

*Note:* Complete sections 2-5 for all students. Only complete section 7 if behavior is an area of concern.

**SECTION 2 – AREA(S) OF CONCERN**

**Only** select areas of concern that significantly impact the student's classroom performance.

- physical limitations
- attention span
- attendance
- memory skills
- activity level
- ability to follow directions
- comprehension
- listening skills
- communication skills
- problem-solving skills
- organizational skills
- self-control
- easily confused
- gross motor skills/coordination
- social/interpersonal skills
- fine motor skills
- passive/nonresponsive
- other \_\_\_\_\_

Academic progress (provide general description)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medical/Health (areas of concern) *Note: Vision and/or hearing concerns should be screened and resolved prior to continuing the Section 504 process and documented here.*

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\_\_\_\_\_  
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\_\_\_\_\_



## Section 504 Referral Packet

Behavior (provide general description)

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Emotional/Social (provide general description)

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Other (areas of concern)

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### SECTION 3 – ADDITIONAL CONCERNS

Include other information that may be helpful to understand concerns.

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### SECTION 4 – STUDENT'S STRENGTHS

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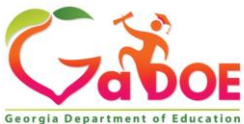
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SECTION 5 – PREVIOUS SUPPORTS PROVIDED

Differentiated Instruction: How instructional content has been presented to provide a different avenue for the student to acquire content and/or ideas.

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Student Products: Changing the assignment or project to adjust to student skill, readiness, or learning preference.

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Physical Environment: Changes to the classroom arrangement and learning environment.

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SECTION 6: ATTACHMENTS

A. If the student is having academic difficulties, please attach a student work sample, benchmark assessments, and/or progressing monitoring data reflecting specific concern (s).

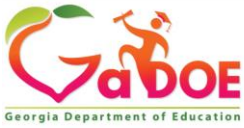
Work sample(s) attached       N/A

B. If there is a medical concern, please attach relevant information or history.

Information attached       N/A

C. If there is a behavioral concern, please attach recent disciplinary action taken or other documentation. **In addition, please complete Section 7: Teacher Input for Addressing Problem Behaviors.**

documentation attached       N/A



**SECTION 7 – BEHAVIOR CONCERNS (ONLY IF REFERRING STUDENT FOR BEHAVIOR CONCERNS)**

A. Describe the behavior(s) of concern. Use concrete and measurable terms. (e.g. *Sam demonstrates aggressive behavior towards his peers at least three to four times daily. His aggression is characterized by such actions as pushing, inappropriate verbal language and grabbing materials from his peers*).

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B. Provide a description of when the behavior(s) occur:

Day or days of the week

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Time or times of the day

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During certain types of activities or tasks

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While in presence of certain people (individuals or groups)

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While in specific environments

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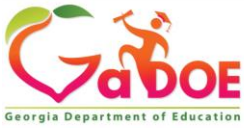
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When fatigued, hungry, or sick

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# Section 504 Referral Packet

C. Identify what the student gains or avoids by demonstrating the behavior(s) of concern.

- Avoid tasks
- Avoid attention
- Unknown/uncertain
- Avoid embarrassment
- Gain attention
- Nothing
- Gain control
- Other \_\_\_\_\_

D. Provide a brief description of specific expectations for the student.

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E. Provide a brief description of how the expectations have been communicated to the student.

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F. Provide a brief description of the strategies and techniques that have been implemented to address the inappropriate behavior.

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## SECTION 8 – PRE-PLACEMENT ACTIVITIES

A. Pre-placement interventions completed?  Yes Date: \_\_\_\_\_  No

B. Pre-placement data reviewed and analyzed?  Yes Date: \_\_\_\_\_  No

C. Explanation for response of 'No' to either question, if applicable:

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