

Section 504 Plan - Joe Smith 2020(1)

Immanuel Lutheran School
200 N. Plum Grove Rd. Palatine, IL 60067
(847) 359-1936

SECTION 504 PLAN

Student Name: Joe Smith
Birth Date:
Grade:
Teacher:

Initial Eligibility Date:
504 Conference Date:
Anticipated Re-Evaluation Date:

Paricpants' Names/Titles:
Father:
Mother:
Resource Teacher:
Teacher:
Principal:

Disabling Condition:
The following accommodations and/or health plan have been agreed upon by school staff, parent(s), and student as being necessary for the stdent to have an educational opportunity equal to the aerage student in the general population.

The following accomodation(s) are the responsibility of the Classroom teachers and School Team

Accomodation 1
Date Accomodation Started:
Substantial Limitation as evidenced by:
Accademic/School Accomodation

Accomodation 2
Date Accomodation Started:
Substantial Limitation as evidenced by:
Accademic/School Accomodation

Accomodation 3
Date Accomodation Started:
Substantial Limitation as evidenced by:
Accademic/School Accomodation

Accomodation 4
Date Accomodation Started:
Substantial Limitation as evidenced by:
Accademic/School Accomodation

The following accomodation(s) are the responsibility of the Classroom teachers, School Team and Media Teacher



Accomodation 1
Date Accomodation Started:
Substantial Limitation as evidenced by:
Accademic/School Accomodation

Accomodation 2
Date Accomodation Started:
Substantial Limitation as evidenced by:
Accademic/School Accomodation

Additional supports or services:

Conference Notes:

Anticipated Annual Review Date:

Signatures

Student Name:
Birth Date:
Date of Meeting:

Conference Participants:

Conference Participants Name/Title:

Father:

Mother:

Resource Teacher:

Principal:

Teacher:

Anticipated Annual Review Date:

☐ I have received a link to ISB504 regulations and procedures:
<https://isbe.net/Pages/Special-Education-Civil-Rights.aspx>
☐ I have received a copy of the Section 504 Plan.
☐ I give consent for my child to receive Section 504 Accommodations.
☐ I do not give consent for my child to receive Section 504 Accommodations.
I have received a link to ISBE 504 regulations and procedures:
<https://www.isbe.net/Pages/Special-Education-Civil-Rights.aspx>



X _____



Signature Certificate

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