



# BUREAU OF INDIAN EDUCATION

*Doing What's Best for Students!*



## CONSENT TO REVIEW EVALUATIVE INFORMATION SECTION 504

Student Name:

School:

Student Id/NASIS#:

Date:

<b>DATA/INFORMATION TO BE REVIEWED</b> <i>When evaluating the case, the Section 504 team will review a variety of available information to make informed decisions about the student. Please check the available information to be reviewed.</i>		
Teacher reports	Educational records	Medical reports
Report cards Student attendance	Observations	Student health records
Aptitude or achievement tests	Information from parents	Developmental reports
Documentation of Interventions	Residential program records	Psychological reports
Attendance records	Extracurricular activities	School Incident Reports
Individualized Education Program team decisions (if applicable)		
Other (explain):		
Other (explain):		
Other (explain):		

*I authorize the school to evaluate the above data/ information for my child to determine possible identification for Section 504 accommodations/services.*

\_\_\_\_\_  
Parent/Guardian Name (Printed)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date