

**Davis County School District**  
**Manifestation Determination Form For Students Served with**  
**Section 504 Protections**

Student Name \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_  
Parent Name \_\_\_\_\_ Phone \_\_\_\_\_  
School Contact Person \_\_\_\_\_  
Description of Safe Schools Violation \_\_\_\_\_

1. Is there evidence that the student understands the "School Safety" rules and that the rules apply to him/her? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If language, vision or hearing impairment was of concern, was an interpreter present?)  
Yes \_\_\_\_\_ No \_\_\_\_\_
2. Does the student's 504 accommodation plan contain accommodations which address this type of behavior? Yes \_\_\_\_\_ No \_\_\_\_\_
3. If these behaviors have been on going, have modifications/adjustments to the student's behavior management plan been made to address these behaviors? (Attach documentation of modifications and results.) Yes \_\_\_\_\_ No \_\_\_\_\_
4. Has it been known by those working with the student that similar problems have occurred in the past? Yes \_\_\_\_\_ No \_\_\_\_\_
5. Does the team agree the conduct in question was caused by or had a direct and substantial relationship to the student's disability? Yes \_\_\_\_\_ No \_\_\_\_\_
6. In light of this incident, should changes be made in the student's 504 accommodation plan to avoid the incident from repeating itself? Yes \_\_\_\_\_ No \_\_\_\_\_

Please specify \_\_\_\_\_

After discussing items 1-6, the multidisciplinary team has determined the student's behavior is \_\_\_\_\_ is not \_\_\_\_\_ a manifestation of his/her disability. Signatures indicate participation in the discussion of the questions above. Opinions differing from the answers checked should be noted in an attached written statement.

_____ 504 Coordinator	_____ Date	_____ Teacher	_____ Date
_____ Teacher	_____ Date	_____ Counselor	_____ Date
_____ Psychologist	_____ Date	_____ Other	_____ Date
_____ Other	_____ Date	_____ Other	_____ Date

Required members: Someone knowledgeable of child, someone knowledgeable of testing and someone knowledgeable of placement/program options.

07/2007