

Series 5000 – Students

1. Elementary and Secondary

D. Welfare

(9) Civil & Legal Rights & Responsibilities

Administrative Regulations Regarding Section 504 of the Rehabilitation Act of 1973

It is the policy of the Suffield Public Schools to comply with all aspects of the Section 504 regulation of the Rehabilitation Act of 1973. Section 504 prevents discrimination on the basis of handicap in programs and activities operated by the school system.

Suffield Board of Education Section 504 Complaint/Grievance Procedures

Under Section 504, a person with a disability is anyone who:

1. has a mental or physical impairment which substantially limits one or more major life activities (major life activities include activities such as learning, self-care, walking, seeing, hearing, speaking, breathing, working and performing manual tasks);
2. has a record of such impairment; or
3. is regarded as having such an impairment.

I. Procedures for Complaints/Grievances Alleging Discrimination on the Basis of Disability

The policy of the Board of Education is to provide for the prompt and equitable resolution of complaints and/or grievances alleging any violation of Section 504. In order to facilitate the timely resolution of such complaints and/or grievances, any eligible person, including any student, parent/guardian, staff member or other employee who feels that he/she has been discriminated against on the basis of disability should contact the district's designated Section 504 Coordinator within thirty (30) days of the alleged occurrence to discuss the nature of the complaint. If the Section 504 Coordinator is the subject of the complaint and/or grievance, the complaint and/or grievance should be submitted to the Superintendent, who shall investigate or appoint a designee to do so. Timely reporting of complaints and/or grievances facilitates the investigation and resolution of such complaints and/or grievances.

Complaints and/or grievances will be investigated promptly and corrective action will be taken when allegations are verified. Confidentiality will be maintained by all persons involved in the investigation to the extent possible. Complaints and/or grievances regarding a student's rights with respect to his/her identification, evaluation, or educational placement shall be addressed in accordance with the procedures set forth below in Section II.

II. *Procedures for Complaints/Grievances Regarding a Student's Identification, Evaluation, and/or Educational Placement*

Complaints and/or grievances regarding a student's identification, evaluation, or educational placement shall be addressed in accordance with the procedures set forth below:

A. Informal Level

1. In order to facilitate the prompt investigation of complaints, any complaint and/or grievance regarding a student's identification, evaluation or educational placement should be forwarded to the district's Section 504 Coordinator within thirty (30) days of the alleged occurrence to discuss the nature of the complaint. Timely reporting of complaints facilitates the resolution of potential educational disputes as it assists the district in gathering current, accurate information and enables the district to take corrective actions when necessary to ensure that a student is provided with an appropriate educational program.
2. The Coordinator shall maintain a written record containing the following:
 - a. Full name and address of complainant;
 - b. Specific areas of disagreement relating to the child's identification, evaluation, and/or educational placement; and
 - c. Remedy requested.
3. At the time the complaint is filed, the Coordinator should direct the complainant to the appropriate administrator who will investigate the complaint and send a written report to the Coordinator. The Coordinator shall then meet informally with the complainant and other relevant individual(s), shall provide confidential counseling where advisable and shall finally seek an informal agreement between the parties concerned. Every attempt shall be made to seek a solution and resolve the Section 504 complaint at this level when possible.
4. This process shall take no longer than ten (10) working days from the time the complaint was received.

B. Formal Level/Impartial Hearing

1. If the complainant is not satisfied with the resolution offered in the initial informal procedures, he/she may initiate more formal procedures to further explore and resolve a Section 504 complaint/grievance regarding a student's identification, evaluation, or educational placement.
2. The complainant shall present the written complaint to the Superintendent within fifteen (15) days after the conclusion of the informal resolution process. The Superintendent may resolve the complaint alone or with the appropriate administrator.
3. If the complaint is not resolved, the Superintendent shall hear and fully review the case within thirty (30) days of the receipt of the complaint/grievance regarding a student's identification, evaluation, or educational placement.

- a. The Coordinator shall inform all parties of the date, time and place of the grievance hearing and of their right to present witnesses or representatives, if desired. The Coordinator shall provide assistance to the complainant in understanding the grievance procedure process.
 - b. A written record of the time, place, date and participants in the hearing shall be kept.
 - c. A written decision shall be sent to the complainant within ten (10) working days after the conclusion of the hearing.
4. If the complainant is not satisfied with the Superintendent's decision, he/she may, within fifteen (15) days of the Superintendent's decision, request that the Superintendent submit the matter to an impartial hearing officer or to a mediator. Mediation shall only occur by mutual agreement of the parties.
- a. Mediation procedures:
 - i) The mediator must be someone who is knowledgeable about Section 504 and the differences between Section 504 and the regulations and requirements of the Individuals with Disabilities Education Act (IDEA).
 - ii) The mediator shall inform all parties involved of the date, time and place of the mediation and of the right to have legal counsel or other representation at the complainant's own expense, if desired.
 - iii) The mediator shall meet with the parties jointly, or separately, as determined by the mediator, and shall facilitate a voluntary settlement of the dispute between the parties, if possible.
 - iv) If the parties are not able to reach a voluntary settlement of the dispute, the complainant may request an impartial hearing, as described below.
 - b. Impartial hearing procedures:
 - i) The impartial hearing officer must be someone who is knowledgeable about Section 504 and the differences between Section 504 and the regulations and requirements of the Individuals with Disabilities Education Act (IDEA).
 - ii) The impartial hearing officer shall inform all parties involved of the date, time and place of the hearing and of the right to present witness(es) and to have legal counsel or other representation at the complainant's own expense, if desired.
 - iii) The impartial hearing officer shall hear all aspects of the complainant's appeal and shall reach a decision within forty-five (45) days of receipt of the written appeal. The decision shall be presented in writing to the complainant.

iv) A Section 504 impartial hearing officer does not have jurisdiction to hear claims alleging discrimination, harassment or retaliation based on an individual's disability unless such a claim is *directly related* to a claim regarding the identification, evaluation, or educational placement of a student under Section 504.

5. The time limits noted throughout Section II may be extended if more time is needed to permit thorough review and opportunity for resolution.

III. *The Section 504 Coordinator for this district is:*

Director of Pupil Services
350 Mountain Rd.
Suffield, CT 06078

Telephone: (860) 668-3806

IV. *Complaints to State and Federal Agencies*

At any stage in these complaint/grievance procedures, the complainant has the right to file a formal complaint with the U.S. Department of Education, Office for Civil Rights, 33 Arch St, Boston, MA 02110, (617) 289-0111. Any such complaints must be filed within one hundred and eighty (180) days of the date of the alleged violation of Section 504.

Any employee who believes that he or she has been discriminated against on the basis of disability may also file a complaint with the Connecticut Commission on Human Rights and Opportunities (CHRO), Capitol Region Office, 2nd Floor, 999 Albany Avenue, Hartford, CT 06105, (860) 566-7710 and/or the U.S. Equal Employment Opportunity Commission (EEOC), JFK Federal Building, 475 Government Center, Boston, MA 02033 (800) 669-4000.

Connecticut law requires that a formal written complaint be filed with the Commission on Human Rights and Opportunities within one hundred and eighty (180) days of the date when the alleged discrimination occurred. Remedies for discrimination include cease and desist orders, back pay, compensatory damages, hiring, promotion or reinstatement.

Regulation adopted: September 2, 2008

SUFFIELD PUBLIC SCHOOLS
Suffield, Connecticut

Appendix 1

COMPLIANCE WITH 504 REGULATIONS REGARDING SECTION 504 NOTICE OF PARENT/STUDENT RIGHTS

Section 504 of the Rehabilitation Act of 1973 (commonly referred to as “Section 504”) is a nondiscrimination statute enacted by the United States Congress. The purpose of Section 504 is to prohibit discrimination and to assure that disabled students have educational opportunities and benefits equal to those provided to nondisabled students.

An eligible student under Section 504 is a student who (a) has, (b) has a record of having or (c) is regarded as having, a physical or mental impairment which substantially limits a major life activity such as learning, self-care, walking, seeing, hearing, speaking, breathing, working, and performing manual tasks.

To be informed of your rights Many students will be eligible for educational services under both Section 504 and the Individuals with Disabilities Education Act (IDEA), but entitlement to services under the IDEA or other statutes is not required to receive services under Section 504.

The following is a description of the rights and options granted by federal law to students with disabilities under Section 504. The intent of the law is to keep you fully informed concerning decisions about your child and to inform you of your rights if you disagree with any of these decisions. You have the right:

1. under Section 504;
2. To have your child take part in and receive benefits from the Suffield School District’s education programs without discrimination based on his/her disability.
3. For your child to have equal opportunities to participate in academic, nonacademic and extracurricular activities in your school without discrimination based on his/her disability;
4. To be notified with respect to the Section 504 identification, evaluation, and educational placement of your child;
5. To have an evaluation, educational recommendation, and placement decision developed by a team of persons who are knowledgeable of your child, the assessment data, and any placement options;
6. If your child is eligible for services under Section 504, for your child to receive a free appropriate public education. This includes the right to receive reasonable accommodations, modifications, and related services to allow your child an equal opportunity to participate in school and school-related activities;
7. For your child to be educated with peers who do not have disabilities to the maximum extent appropriate;
8. To have your child educated in facilities and receive services comparable to those provided to non-disabled students;

9. To review all relevant records relating to decisions regarding your child's Section 504 identification, evaluation, and educational placement;
10. To obtain copies of your child's educational records at a reasonable cost unless the fee would effectively deny you access to the records;
11. To request changes in the educational program of your child;
12. To an impartial hearing if you disagree with the school district's decisions regarding your child's Section 504 identification, evaluation or educational placement. The costs for this hearing are borne by the local school district. You and the student have the right to take part in the hearing and to have an attorney represent you at your expense.
13. To file a court action if you are dissatisfied with the impartial hearing officer's decision or to request attorney's fees related to securing your child's rights under Section 504.
14. To file a local grievance with the designated Section 504 Coordinator to resolve complaints of discrimination other than those involving the identification, evaluation or placement of your child.
15. To file a formal complaint with the U.S. Department of Education, Office for Civil Rights.

The Section 504 Coordinator for this district is:

Director of Pupil Services
350 Mountain Rd.
Suffield, CT 06078
Telephone: (860) 668-3806

For additional assistance regarding your rights under Section 504, you may contact:

Office for Civil Rights-Region 1
U.S. Dept. of Ed.
33 Arch St. – Suite 900
Boston, MA 02110 Telephone: (617) 289-0111

CT Commission on Human Rights & Opportunities (CRRO)
Capitol Region Office, 2nd Floor
999 Asylum Ave.
Hartford, CT 06105 Telephone (860) 566-7710

Connecticut State Department of Education
Bureau of Special Education
P.O. Box 2219
Hartford, CT 06145 Telephone: (860) 713-6910

Section 504 Referral Form
Suffield Public Schools
Suffield, CT

I. Identifying Information

Name: _____ DOB: _____ Age: _____
Date of Referral _____

___ Male ___ Female Primary Language: ___ English ___ Other: _____

Parent/Guardian: _____
Address: _____ Home Phone: _____
Work Phone: _____

Current School: _____ Grade: _____ Referring Person: _____

II. Background Information

A. Reason for Referral (Identifying Areas of Concern)

B. Strategies/Interventions to Date (attach copies of documentation)

C. Pertinent Evaluative Data (e.g. test scores, grades, evaluations, etc.)

D. Other Relevant Information

E. Special Services History

Are you aware of any special services that have been provided to this student in the past?

___yes ___no

If yes, describe the type, location and provider of the service.

SECTION 504 MEETING NOTICE

Suffield Public Schools
Suffield, CT

Date: _____

Parent/Guardian: _____
Street: _____
City/Zip Code: _____

Parent/Guardian: _____
Street: _____
City/Zip Code: _____

Dear _____

Please be advised that a Section 504 Plan Development meeting will be convened on behalf of your child, _____.

(Child's Name)

The meeting is scheduled as follows:
Date: _____ Time: _____ Location: _____

The purpose of this meeting is to:

- _____ Determine Eligibility
- _____ Review 504 Accommodation Plan
- _____ Develop Section 504 Student Accommodation Plan If Deemed Necessary

The following individuals have been invited to attend:

_____ Name	_____ Administration	_____ Name	_____ Title
_____ Name	_____ Instruction	_____ Name	_____ Title
_____ Name	_____ Related Service	_____ Name	_____ Title
_____ Name	_____ Title	_____ Name	_____ Title
_____ Name	_____ Student, if appropriate	_____ Name	_____ Title

Please make every effort to attend this meeting. You may bring anyone of your choosing to this meeting. The meeting can be rescheduled at a mutually agreed upon time and place. A COPY OF YOUR RIGHTS IS ENCLOSED. If you have any questions or wish to reschedule the meeting, please contact me:

Sincerely,

Name and Title

Section 504 - STUDENT ACCOMMODATION PLAN
Suffield Public Schools
Suffield, CT

NAME: _____ BIRTHDATE: _____ GRADE: _____

SCHOOL: _____

DATE OF MEETING: _____

1. Describe the nature of the concern:

2. Describe the basis for the determination of disability (if any):

3. Describe how the disability affects a major life activity:

4. Describe the reasonable accommodations that are necessary:

Review/Reassessment Date: _____
(must be completed)

Participants (Name and Title)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

cc: Student's Cumulative File

Section 504 - Student Eligibility Determination

Name: _____ DOB: _____ Age: ___ Male: ___ Female: ___

Date of Meeting: _____ Current School: _____ Grade: _____

Case Manager: _____

Parent/Guardian: _____ Address: _____

Home Phone: _____ Work Phone: _____

Parent/Guardian: _____ Address: _____

Home Phone: _____ Work Phone: _____

Reason for Meeting: Initial ___ Review ___ Revise Plan ___

Describe the nature of the concern:

Describe any evaluation procedure, tests, recommendations or documentation used as a basis for the decision:

- Cognitive:(dated)_____ Classroom Observation:(dated)_____
- Health/Med:(dated)_____
- Communication:(dated)_____ Achievement:(dated)_____
- Social/Emot./Beh:(dated)_____
- Developmental:(dated)_____ Adaptive:(dated) _____
- Motor:(dated)_____ Other:(dated)_____

Specify the mental or physical disability:

(as recognized in DSM-IV or other respected source if not excluded under 504/ADA, e.g. illegal drug use)

Check the Major Life Activity: ___ seeing ___ hearing ___ walking ___ speaking ___
learning ___ breathing ___ working ___ performing manual tasks
___ caring for oneself

_____ Does Require a 504 Plan
_____ Does NOT Require a 504 Plan

Section 504
Request for Mediation/Hearing

Name of person requesting mediation/hearing: _____

Address: _____

Phone #: _____

Fax #: _____

I/we request a **MEDIATION** / **HEARING** (please circle) concerning

_____, _____, who resides at
(Name of student) (Date of birth)

_____ and attends _____.
(Address of student) (Name of school)

The date of the Section 504 meeting at which the parties failed to reach agreement: _____

Description of the issues in dispute between the parties:

Proposed resolution or corrective action you wish to see taken with regard to the stated issues:

Signature of Parent/Guardian

Date