

TORRINGTON PUBLIC SCHOOLS NOTICE AND CONSENT TO CONDUCT A SECTION 504 EVALUATION/REEVALUATION

		Date:	
Dear			
(student's nar determine eligibility for services unde before conducting such an evaluation.	ne) (DOB r Section 504. The school	district must obtain the consent of	
The tests/evaluation procedu	res listed below we	re recommended:	
TEST/EVALUATION PROCEDURE	AREA OF ASSESSI	MENT EVALUATOR	<u>(S)</u>
	-		
Adaptations/accommodations requ	ired for this evaluation are:	;	
If the student requires physical adapta the following adaptations are required		-	
If the student's native language is other	er than English, the following	ng adaptations are required:	
			

No adaptations/accommodations required

PARENTAL CONSENT

I give my consent for the Torrington Public Schools to conduct the evunderstand that this consent may be revoked at any time.	valuations described above. I
Parent/Guardian Signature	Date
I do not give my consent for the Torrington Public Schools to conduct I understand that the school district must take steps as are necessary, wimpartial hearing, to ensure that my child receives or continues to receive education.	which may include requesting an
Parent/Guardian Signature	Date