



530 Perryville St • Harrodsburg, KY 40330  
(859) 733-7000 • Fax (859) 733-7004  
www.mercer.kyschools.us

### SECTION 504 CONSENT FOR ELIGIBILITY EVALUATION

|               |  |                 |  |
|---------------|--|-----------------|--|
| Student Name  |  | School          |  |
| Date of Birth |  | Date of Meeting |  |

As the parent of the student listed above, I:

- Voluntarily grant permission for an evaluation to determine Section 504 eligibility to be completed by school district personnel or individuals working in cooperation with the school district.
- Deny permission to for a Section 504 eligibility evaluation to occur

Additional Information:

- I understand the reasons for the referral and the description of the evaluation process and have checked the appropriate box above.
- I have received a written copy of the Section 504 Parent Rights Statement and fully understand those rights.
- I certify that I am a parent having legal custody of the student named above, or that I am the student above and am at least 18 years old of age and have no court appointed legal guardian or I certify that I am the legal guardian, permanent legal custodian or 504 surrogate parent of the student named above.

Signature of Educational Representative: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Date: \_\_\_\_\_