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SECTION 504 CONSENT FOR IMPLEMENTATION

Student Name		School	
Date of Birth		Date of Plan	

As the parent of the student listed above, I:

- Voluntarily grant permission for the implementation of the Section 504 Accommodation Plan completed at the date above.
- Deny permission to implement the Section 504 Accommodation plan completed on the date above.

Additional Information:

- I understand the reasons for the Section 504 services 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: _____