

## Manifestation Determination

*(Under Section 504, a Manifestation Determination Meeting must be held to consider disability-related factors when assessing a student's disciplinary removal if the removal is for more than 10 consecutive school days or when the student is subjected to a pattern of short-term removals that cumulate to more than 10 school days in a year.)*

Date: \_\_\_\_\_

Student: \_\_\_\_\_

School: \_\_\_\_\_

SSID: \_\_\_\_\_

Grade: \_\_\_\_\_

DOB: \_\_\_\_\_

**Brief description of student's disability, based on evaluation data:**

Enter text

**Description of the incident that resulted in disciplinary action:**

Enter text

**Description of relevant information and data considered** *(For example, the student's Section 504 Plan, behavioral/disciplinary history, teacher observations, and any relevant information provided by the parent(s):*

Enter text

### Part I

<b>Determination</b> <i>(based on the information and data described above)</i>		
Was the conduct in question the direct result of the district's failure to implement the student's 504 plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Enter text
The conduct in question was caused by, or had a direct and substantial relationship to, the student's disability.	<input type="checkbox"/> Yes <input type="checkbox"/> No	Enter text

***If the answer to one or both of the above questions is "Yes", the behavior is a manifestation of the student's disability.***

### Part II

Check one:

☐ The behavioral violation in question **WAS** a manifestation of the student's disability:

*If the conduct is a manifestation of the student's disability, the team needs to review the student's placement and determine if any behavioral supports such as a BIP are appropriate to put in place.*

**Next Steps:**

Enter text

☐ The behavioral violation in question **WAS NOT** a manifestation of the student's disability:

*The school may administer discipline consistent with the school district's discipline policy and procedure.*

**Next Steps:**

Enter text

### Meeting Attendees

*The Section 504 Team include must: (1) someone who knows the student—for example, a parent, teacher, physician, nurse, or counselor; (2) someone who can analyze and interpret the evaluation data; and (3) someone who is knowledgeable about placement options at the school. Note that a staff person can fill more than one of these.)*

#### Meeting Attendee Information

<b>Name</b>	Enter name	<b>Title</b>	Enter title
<b>Signature</b>			
<b>Phone</b>		<b>Email</b>	
<b>This person knows:</b> <input type="checkbox"/> the student <input type="checkbox"/> the meaning of the evaluation data <input type="checkbox"/> placement options			

<b>Name</b>	Enter name	<b>Title</b>	Enter title
<b>Signature</b>			
<b>Phone</b>		<b>Email</b>	
<b>This person knows:</b> <input type="checkbox"/> the student <input type="checkbox"/> the meaning of the evaluation data <input type="checkbox"/> placement options			

<b>Name</b>	Enter name	<b>Title</b>	Enter title
<b>Signature</b>			
<b>Phone</b>		<b>Email</b>	
<b>This person knows:</b> <input type="checkbox"/> the student <input type="checkbox"/> the meaning of the evaluation data <input type="checkbox"/> placement options			

<b>Name</b>	Enter name	<b>Title</b>	Enter title
<b>Signature</b>			
<b>Phone</b>		<b>Email</b>	
<b>This person knows:</b> <input type="checkbox"/> the student <input type="checkbox"/> the meaning of the evaluation data <input type="checkbox"/> placement options			

### Meeting Attendee Information

**Name**     Enter name     **Title**     Enter title  
**Signature**     \_\_\_\_\_  
**Phone**     \_\_\_\_\_     **Email**     \_\_\_\_\_  
**This person knows:** ☐ the student ☐ the meaning of the evaluation data ☐ placement options

**Name**     Enter name     **Title**     Enter title  
**Signature**     \_\_\_\_\_  
**Phone**     \_\_\_\_\_     **Email**     \_\_\_\_\_  
**This person knows:** ☐ the student ☐ the meaning of the evaluation data ☐ placement options

**Name**     Enter name     **Title**     Enter title  
**Signature**     \_\_\_\_\_  
**Phone**     \_\_\_\_\_     **Email**     \_\_\_\_\_  
**This person knows:** ☐ the student ☐ the meaning of the evaluation data ☐ placement options