

Corvallis SD 509J - (541)757-3896  
1555 SW 35th Street, Corvallis, OR 97333

## Section 504 Eligibility Determination and Student Accommodation Plan

Student Name: Zoe Bess Lieberman	Date of Birth: 02/08/2000
District Student ID: 0312969	Grade: 10
Attending District: Corvallis SD 509J	Attending School: Crescent Valley High School
Meeting Date: 10/27/2015	Date of Initiation of Plan: 10/28/2015

Meeting Participants (list or sign)		Area of Knowledge Relative to this Meeting		
Name	Title	About Student	About Evaluation Data	About Accommodations/Placement Options
Sara McCune	Counselor	Yes	Yes	Yes
Kristin Lieberman	Mother	Yes	Yes	Yes
Mark Lieberman	Father	Yes	Yes	Yes
Zoe Lieberman	Student	Yes	Yes	Yes
Annika Bay	Counselor	Yes	Yes	Yes
Cherie Stroud	Principal	Yes	Yes	Yes

### A. Evaluation Summary

#### Educational History & Present Educational Placement Status:

Zoe has attended school within the Corvallis School District since eighth grade (Cheldelin Middle School). She was exited from Special Education during the 2014-15 school year. Zoe has a general education placement at this time.

#### Sources of Evaluation Information (include date and description):

Zoe was placed on a 504 plan on December 15, 2014 for Attention Deficit Disorder and Strabismus. In September and October 2015, Zoe began having new medical difficulties. She has received treatment and diagnostics from Doernbecher Children's Hospital and the Pediatric Rheumatology Clinic, The Children's Hospital at Legacy Emanuel. While a specific diagnosis(es) is pending, it is clear to her doctors and her family that she is need of additional academic accommodations.

#### Results of Assessment:

Results of her many assessments are pending, but Dr. Cartwright indicated that her disease involves multiple areas, including all of her joints and overall health. At this time, Zoe has been diagnosed with polyartritic arthritis, but it is expected that she will receive additional diagnoses in the coming weeks. Her symptoms and severity may vary from day to day and throughout the day. Zoe is the best judge of her tolerance for various activities.

#### Present Learning and Education Performance Description

##### a) Current classes and grades:

Prior to Modified Schedule:

P1(Y) German 2 74.0/C

P2(Y) Draw & Paint 2 (Beg)

P3(Y) Hon Intl Literature 76.2/C

P4(Y) Geometry 27.9/F

P5(Y) Hon Intl Studies 13.6/F

After Modified Schedule:

P3(Y) Hon Intl Literature 76.2/C  
 P5(Y) Hon Intl Studies 44.0/F  
 P7(Y) Online Attendance  
 -> Online Art History through CV  
 -> Online Geometry through BYU Online

**b) School attendance:**

Zoe has missed many days due to her illness this school year. She has missed ~20 days (or partial days) of school so far this school year. Her inability to attend classes regularly has negatively impacted her academic performance.

**c) Other relevant information:**

**B. Eligibility Determination**

1. Does the student have a physical or mental impairment? ☒ Yes ☐ No

If yes, describe:

In addition to her original diagnoses of ADD and Strabismus, Zoe now has a diagnosis of polyartritic arthritis. The doctors expect that she will receive additional diagnoses in the coming weeks, but these have yet to be determined at this point.

2. Does the student's impairment substantially limit one or more major life activities? ☒ Yes ☐ No

If yes, check appropriate box below. (Note: Do not consider medication, assistive devices or other ameliorating factors.)

<input type="checkbox"/> Seeing	<input checked="" type="checkbox"/> Thinking	<input checked="" type="checkbox"/> Reading	<input type="checkbox"/> Other bodily functions
<input type="checkbox"/> Hearing	<input checked="" type="checkbox"/> Concentrating	<input checked="" type="checkbox"/> Walking	<input checked="" type="checkbox"/> Other: Writing
<input checked="" type="checkbox"/> Speaking	<input checked="" type="checkbox"/> Learning	<input type="checkbox"/> Breathing	

If yes, describe how the activity is substantially limited:

Zoe's mobility is very limited due to the arthritis in 27 different joints. She struggles to hold a pencil/pen, to move from class to class, and to attend school on a regular basis. She also suffers from aches, chills, and fevers on an almost daily basis, which impairs her ability to think, concentrate, learn, read, and speak. She needs plenty of time to rest between (and during) activities and cannot do anything that is very physical for an extended period of time.

3. Does the student need accommodations, services or supports to access the benefits of public education at a level similar to the average student? (Note: Consider student as student presents in school setting, which may include medication, assistive devices and other ameliorating factors.)

☒ Yes ☐ No

If yes, complete the 504 Plan section below.

This document constitutes the district's notice to parents regarding the student's eligibility or non-eligibility under Section 504.

**C. 504 Plan (Complete only if answer to #3 above is "yes")**

List the accommodations, services or supports necessary to address the student's disability in the educational setting:

Timeline extensions: Timeline extensions may be required on either tests or assignments. Timeline extensions of 1.5X the normal requirement would be appropriate.

Quiet test-taking environment: Zoe should have access to a quieter environment for taking tests.

Note-taker: Zoe must be provided with class notes. Please assign a note-taker and/or furnish teacher notes.

Word processor: Allow Zoe to keyboard/use a word processor/iPad whenever possible.

Audiobooks: Allow Zoe access to audiobooks when available.

Dictation: Allow Zoe to dictate papers/assignment to her parents when she is unable to write or type.

Preferential seating: Allow Zoe to sit on the aisle so that she has room to stretch her legs during class.

Book access: Provide Zoe with an additional copy of a book for home use so that she does not need to carry a heavy backpack full of books back and forth from school.

Transition time: Provide Zoe with extra time to move between classes (e.g. excused five minutes early and/or allowed to be five minutes late), as needed.

Breaks: Allow Zoe to take stretch breaks during class.

Eating: Allow Zoe to eat snacks during class if medications need to be taken with food.

Late drop: Zoe may drop a class after the drop deadline without penalty if her medical issues are preventing her from succeeding in/attending class.

Pass/No Pass: Zoe may elect to take classes pass/no pass.

#### Describe the educational placement:

General education placement with a modified day. Zoe is currently unable to attend a full school day due to her medical issues. As her health improves, she may be able to add additional classes back into her schedule/

Option	Selected?	Explain
Regular school/general curriculum with accommodations as listed	<input checked="" type="checkbox"/>	Least restrictive environment
Other (describe):	<input type="checkbox"/>	

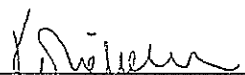
#### D. Notice

This document constitutes the district's notice to parents with respect to identification, evaluation and placement under Section 504.

#### E. Parent Consent (*Complete for initial 504 plans*)

☒ I agree to implementation of this 504 Student Accommodation Plan. I understand that granting of consent is voluntary.

☐ I do not agree to implementation of this 504 Student Accommodation Plan. I understand that denial of consent is voluntary.





Parent/Guardian Signature      Date      Work Phone      Home Phone

#### F. Annual Review

*Significant changes should be written on a new form and attached to the originals.*

Date	Participants	Changes to disability status?	Changes to plan?
10/27/2015	Mark Lieberman, Kristin Lieberman, Zoe Lieberman, Martha Rost, Cherie Stroud, Annika Bay, Sara McCune	Added additional disabilities	Yes

