

## 504 PLAN REQUEST EMAIL

1. *In all blue areas, type in all the correct information replacing the generic language. You can find out any names and emails of school staff by calling your child's school or looking at the school's website.*
2. *In all red areas, follow the instructions and then erase the red text from the email*
3. *Once complete, highlight the information in the email below and select the black color for all the text on the form below.*
4. *Copy the completed email and paste it into an email.*

To: Email Address of Principal  
Email Address of Asst Principal (All or One in charge of 504 Plan school staff)

Cc: Email Address of 504 School Liaison

RE: Request for a 504 Plan for Child's Name

Dear Names of Principals and 504 Liaison:

I am the Parent/Legal Guardian/Foster Parent/Educational Decision Maker of Child's Name, a child at your school (my child).

My child is struggling in school and I am hoping you can help me. ***I am respectfully requesting a meeting with you and school staff to see if my child needs a 504 Plan. My child has a disability/impairment and I believe my child may need the supports that a 504 Plan provides.*** My child's birthday is Month/Date/Year.

My child has been diagnosed with Type in Name of Disability Child has been Diagnosed with.

**CHOOSE ONE OF THE FOLLOWING, ERASE THE OTHER ONES, AND MAKE FONT BLACK.**  
I am attaching proof of the disability from a professional OR I will bring in proof of the disability when we meet.

I believe my child may need a 504 Plan because my child's documented impairment affects their major life activity of doing well in school. Specifically, my child is struggling in school based on the following: **CHOOSE ONE OR MORE AND ERASE WHAT DOES NOT FIT YOUR CHILD and erase this red writing**

- Low grades
- Low test scores
- Is struggling according to a teacher
- Not turning in work; Struggling with homework
- Getting in trouble at school
- Crying or showing anxiety at home
- Not going/wanting to go to school
- Needs special help due the disability or needs some flexibility of school rules based on the

- effects of the disability
- Navigating the school campus and getting to classes on-time
- Add any specific struggle or issue your child is having based the effect of the disability and is affecting your child's education and either erase this bullet point or make it black

***I would also like to discuss at our meeting what school supports and interventions are available for my child generally and how I can help my child do well in school. I have heard there are interventions, behavior plans, and incentive plans that may be available for my child to be put into place to help my child engage in school outside of the 504 Plan, while the 504 Plan is being put into place, or as a part of the 504 Plan.***

If you do not believe my child needs a 504 Plan, I know I will hear from you in writing within 30 days of this request. If you do not think my child needs a 504 Plan and deny my request which I know you are allowed to do, I know I will receive the reasons for your denial and you will let me know the next steps are/what my rights are.

I believe my child can succeed at your school if given the proper supports. I hope we can work together to support my child through the 504 Plan or otherwise.

Thank you for your time and effort in considering my request. Please contact me within 2-3 school days to discuss meeting at [Phone Number](#) and my email address above.

Respectfully,  
[Parent's Name](#)