

AMARILLO INDEPENDENT SCHOOL DISTRICT
SPECIAL EDUCATION DEPARTMENT

AMARILLO, TEXAS

NOTIFICATION TO CAMPUS 504 COORDINATOR
FROM SPECIAL EDUCATION

On _____ an ARD Committee meeting was held concerning the following student:

Name _____ DOB _____

Grade _____ Campus _____

The following decision was made:

____ Not eligible for Special Education services

Reason for referral to Special Education (suspected disability)

Comments:

Comments by 504 Campus Coordinator:

Diagnostician/Speech Therapist

Date