

INFORMATION SHEET

SECTION 504
1973 REHABILITATION ACT

In accordance with Section 504 of the 1973 Rehabilitation Act, please list the names of those students in your class with observable disabilities.

NAME OF STUDENT

NATURE OF DISABILITY

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I have no student with disabilities. _____

Signed: _____
(Instructor)

*Please complete and return to: **Joye Farris**, Dean of Students office – Ramsey Hall 216, by **Friday, August 29, 2014**. You may e-mail the form or send it through intercampus mail.*

FILE: Special Populations Counselor