



Lincoln Public Schools

ST0030
Rev. 1/26

Department of Student Services • 5905 O Street • Lincoln NE 68510 • 402-436-1688 • (Fax) 402-436-1686

504 PARENT LETTER Department of Student Services Lincoln Public Schools

Date: _____

To the parent/guardian of: _____

In preparation for the _____ school year, we are sending you a copy of your student's 504 accommodation plan. Please review the plan and indicate your decision below, and return the form to the school.

Thanks for your continued support and involvement in this process.

Sincerely,

Name, Position, School

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- The 504 Plan includes the appropriate information; no further meeting is necessary.
- Parent/guardian made minor adjustments to the plan, by writing on the plan and returning it to school. No meeting is necessary.
- Parent/guardian would like to schedule a meeting to review and/or update this plan.
- Discontinue plan for the _____ school year.

Parent/Guardian Signature

Date