Tri-County Regional Vocational Technical High School
Teacher Report Form for Section 504 Evaluation

Check One:
☐ Initial Evaluation  ☐ Annual Review  ☐ Reevaluation  ☐ Reconvene  ☐ Other:_________

Name of Student:___________________________    Grade:       9           10         11        12
Date of Report: ________________________    Date of Meeting: _________________
Teacher: ___________________________________   Subject: ________________________

1. Describe the student’s performance in your class as it relates to the curriculum expectations. Please include descriptive example to support your response.

2. Does the student participate appropriately in classroom activities (group work, class discussion, labs, oral presentations, etc.)? If the answer is “no”, please explain your observations.

3. Are the student’s skills, as they compare to other students in the classroom, age appropriate? If the answer is “no”, briefly explain the area of weakness.

4. What classroom accommodations have been effective in working with the student? Please provide specific examples.
5. Are the student’s interpersonal skills with groups, peers, and adults age-appropriate? If the answer is “no”, please give examples.

6. Comment on the student’s performance on assessments. Include the most recent test, quiz and project grades.

   a. Does the student complete tests within the allotted time?

7. Does the student regularly complete homework assignments on time?

8. Comment on additional factors that influence the student’s performance.