



# Section 504 Progress and Accommodation Review Worksheet

Office of Student and Family Support and Engagement  
 MONTGOMERY COUNTY PUBLIC SCHOOLS  
 Rockville, Maryland 20850

MCPS Form 270-2C  
 November 2016  
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Student Name \_\_\_\_\_ Student ID# \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Teacher's Name \_\_\_\_\_ Subject \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**DIRECTIONS:** Please respond to the following questions and return to the student's case manager.

Case Manager Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Please list each accommodation in the space provided and check the appropriate frequency of use and effectiveness\* of each accommodation.

\*Provide evidence to show effectiveness (e.g., data charts, narrative notes, etc.)

ACCOMMODATION	FREQUENCY OF USE					EFFECTIVENESS*				
	NEVER	RARELY	SOME-TIMES	OFTEN	ALWAYS	INEFFECTIVE	NOT VERY	SOME-WHAT	EFFECTIVE	HIGHLY

**Using the information from the chart above, please respond:**

Is the student using the accommodations listed on the current 504 Plan? If not, what are the particular accommodations that are no longer used? Why?

Have you provided additional accommodations specific to this student which are not listed on the Plan? If yes, what accommodations did you provide? What was the outcome?

What concerns, if any, continue to exist?

<b>ACADEMIC SKILLS</b> <b>(Check one for each area)</b>	<b>NEVER</b>			<b>ALWAYS</b>
Completes tasks	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Performs well on quizzes and tests	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Completes in-class assignments	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Brings materials to class	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Good effort	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Makes up work/tests	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Follows directions	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
Completes homework	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

	<b>PERFORMANCE AREA</b> <b>(Check one for each area)</b>			<b>If the student was not receiving accommodations, would the Performance Level be the same?</b>	
<b>Math</b>	<input type="checkbox"/> Below	<input type="checkbox"/> On	<input type="checkbox"/> Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Reading—Decoding</b>	<input type="checkbox"/> Below	<input type="checkbox"/> On	<input type="checkbox"/> Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Reading Comprehension</b>	<input type="checkbox"/> Below	<input type="checkbox"/> On	<input type="checkbox"/> Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Writing</b>	<input type="checkbox"/> Below	<input type="checkbox"/> On	<input type="checkbox"/> Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Oral Communication</b>					
Listening Comprehension	<input type="checkbox"/> Below	<input type="checkbox"/> On	<input type="checkbox"/> Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Speaking	<input type="checkbox"/> Below	<input type="checkbox"/> On	<input type="checkbox"/> Above	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Grade Level: Reading _____ Math _____					