## MODEL FORM: VERIFICATION OF CONSENT

*The Minnesota Department of Education has developed this model form for use by the education community. Districts are not required to use this model. The purpose of this model form is to provide helpful guidance and a documentation model including the required data elements for compliance with Section 504 requirements. Organizations are responsible for ensuring its accessibility for their end-users.*

Student Name: NAME\_STUDENT

CONSENTYES I consent to the initial Section 504 evaluation of my child.

CONSENTNO I do not consent to the initial Section 504 evaluation of my child.

Parent1 Date

Parent2 Date