

Jackson Local School District  
7602 Fulton Drive N.W.  
Massillon, Ohio 44646

**Acknowledgement of Receipt of 504 Accommodation Plan**

Date: \_\_\_\_\_

To: \_\_\_\_\_

From (504 Team Chairperson): \_\_\_\_\_

Attached is a copy of the Section 504 Plan to be implemented as a result of the Section 504 Team's decision regarding the following student.

Student: \_\_\_\_\_ School: \_\_\_\_\_

Acknowledgement of Receipt of Section 504 Plan

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Please return to Team Chairperson noted above.