

REQUEST FOR DISPUTE RESOLUTION

Any individual, organization, or parent may document an allegation of a violation of Part C of Individuals with Disabilities Education Act (IDEA) in general or with respect to an individual child and request an investigation under the Written State Complaint procedures. Parents have additional options for dispute resolution. Anyone filing a complaint and/or requesting dispute resolution procedures must complete and sign this form and submit it at the address listed below.

There are three types of dispute resolution:

- **Written Formal Complaint:** is filed when you, an agency, or an individual want the state lead agency to investigate if IDEA has been followed. If IDEA has not been followed, the state must provide a resolution to the problem.
- **Mediation (parents only):** is a voluntary process under Part C of IDEA that brings you and others together to resolve disagreements. An impartial, qualified and trained mediator helps participants communicate with each other so that everyone has an opportunity to express concerns and offer solutions. If a dispute is resolved through the mediation process, a written and legally binding agreement is created and signed.
- **Due Process Hearing (parents only):** is requested when you want an officer of the court to make a legally binding decision about whether IDEA has been followed.

SECTION 1: TYPE OF DISPUTE RESOLUTION

I am requesting dispute resolution via:

Written Formal State Complaint

Parents only:

Mediation

Due Process Hearing

This form is being submitted with respect to the following child:

Not Applicable

Child's First Name:

Child's Last Name:

Date of Birth:

Address:

SECTION 2: WHAT RIGHTS OR REGULATIONS UNDER PART C OF IDEA DO YOU BELIEVE HAVE BEEN VIOLATED?

SECTION 3: PROVIDE A SUMMARY OF THE SITUATION OR COMPLAINT, BEING SPECIFIC AS POSSIBLE. PLEASE DESCRIBE ANY EVENTS, ACTIONS, AND/OR INACTION WITH DATES, IF KNOWN. USE THE BACK OF THIS FORM OR ADDITIONAL PAGES AS NEEDED:

SECTION 4: WHAT RESOLUTION WOULD YOU PROPOSE TO REMEDY THE SITUATION, IF ANY?

SECTION 5: COMPLAINANT CONTACT INFORMATION

First Name:

Last Name:

Relationship to Child:

N/A

Address:

Area Code and Phone Number:

E-Mail Address:

Signature

Date