## Request for Mediation Special Education





Mediation is a voluntary process where a State Department of Education (SDE) trained neutral and thirdparty provides a structure for parents/adult students and district/charter personnel to identify points of agreement. They work to resolve points of disagreement concerning the identification, evaluation, educational placement, or provision of free appropriate public education (FAPE). Mediation aims to build positive working relationships, encourages mutual understanding, and helps the parties focus on their

	harge for mediation to either the district/charter or the ict/charter must agree to participate in mediation. Please see anual for additional information.
	derstand that the school district/charter and the or this request to move forward. I acknowledge that the member, an advocate, or a decision-maker.
	Date:
Mediation request is being initiated by (check $\Box$ Parent $\Box$ Guardian $\Box$ Adult Student $\Box$ S	·
STUDENT INFORMATION	
Name of Student:	
Address:	
Grade:	Age:
School District/Charter:	School Student Attends:
PARENT/GUARDIAN INFORMATION	
Name of Parent/Guardian:	
Address:	
City:	Zip:
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## **DISTRICT/CHARTER INFORMATION**

Fmail:	Phone:
Request for the mediator to address t	the following issues:
☐ Identification/Evaluation	☐ Accommodations/Modifications
☐ Related Services	☐ Placement
☐ Assistive Technology	$\square$ Goals and Objectives
☐ Progress Reporting	☐ Services
$\square$ Transition	☐ Present levels of performance
$\square$ Discipline/Behavior	$\square$ Implementation of IEP
□ Other:	
Proposed resolution to the problem	(to the extent known and available at this time):

You may mail, fax, or email the mediation request form to the following:

Dispute Resolution Coordinator Idaho Department of Education PO Box 83720 Boise, ID 83720-0027

Fax: (208) 334-2228

Email: disputeresolution@sde.idaho.gov

The Idaho State Department of Education takes precautions to maintain the confidentiality of personally identifiable information. However, email communications are not always secure and may be read by individuals who are not the intended recipients. By completing this form and emailing it to the Idaho State Department of Education, you acknowledge that you understand the potential risks and are voluntarily communicating by email.

**NOTE:** Our office will appoint a mediator within three business days of all parties agreeing to mediate. The mediator will coordinate a date and time that works for all parties.