



**Student Information**

Name:		Area(s) of Eligibility:	
Date of Birth:		School:	
Grade:		Local Education Agency(LEA):	

**Background Information**  
*Please provide the requested information. Enter "N/A" (Not Applicable) where appropriate.*

Date(s) of previous mediations:		Date filed State Complaint:	
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Nature of the dispute:

**For parent, adult student or interested party:**  
 Did you notify the LEA of this request for mediation?  Yes  No  
 If yes, who was the person notified? \_\_\_\_\_ When? \_\_\_\_\_  
 How was the person notified? \_\_\_\_\_

**For Local Education Agency (LEA):**  
 Did you notify the LEA of this request for mediation?  Yes  No  
 If yes, who was the person notified? \_\_\_\_\_ When? \_\_\_\_\_  
 How was the person notified? \_\_\_\_\_

**Due Process Petition**

*Complete this section only if Due Process has been requested.*

Case Number:		Date of expedited hearing request:	
Date of Due Process request:			
<i>Regulations permit both the parent and LEA to agree that mediation will be used instead of a resolution session or may be the outcome of the resolution session. Please initial below if both parties agree to mediation. <b>**The Resolution Meeting Form must be included with this request.**</b></i>			
Parent (initials):		LEA Representative (initials):	

**Contact Information**

*Must include names and contact information for both parties. Missing information may delay the process.*

LEA Representative		Parent/Guardian	
Name:		Name:	
Mailing Address:		Mailing Address:	
Phone Number:		Phone Number:	
Email Address:		Email Address:	
<b>Attorney for LEA</b> , if applicable:		<b>Attorney for Parent</b> , if applicable:	
Name:		Name:	
Mailing Address:		Mailing Address:	
Phone Number:		Phone Number:	
Email Address:		Email Address:	

**Support Needs**

*Please describe below.*

Translation	
Interpreter	
Accessibility	

**Submission Information**

Name of individual completing this request form:

Print Name:			
Signature:		Date:	

**This form must be completed and sent to:**

NCDPI – EC Division  
Attn.: Mediation Coordinator  
[mediation@dpi.nc.gov](mailto:mediation@dpi.nc.gov)  
Fax: (919)807-3755