

Background Information

OAH Case Number:		Petitioner:	
Student Name:		Respondent:	
Date(s) of Resolution Meeting:		Location:	

Expedited Due Process Hearing: Yes No

Decision

- Parent agrees to attend a resolution meeting
 - with an attorney without an attorney
- Both** the Petitioner and Respondent agree to
 - waive a resolution meeting¹
 - waive a resolution meeting and participate in mediation²

Parent(s) Signature:		Date:	
LEA Representative Signature:		Date:	

- Parent refuses to participate in resolution meeting.³

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:	
Attorney for LEA , if applicable:		Attorney for Parent , if applicable:	
Name:		Name:	
Mailing Address:		Mailing Address:	
Phone Number:		Phone Number:	
Email Address:		Email Address:	

This form must be completed and faxed to:

Office of Administrative Hearings
Attn.: Kim Hausen
(919) 431-3100

NCDPI – EC Division
Attn.: Due Process Coordinator
(919) 807-3755

¹ Signatures required.

² Signatures required. The LEA must complete this form and a Mediation form and fax to the EC Division Mediation Coordinator at 919-807-3755. *Incomplete or missing forms may delay the mediation process.*

³ The LEA must document efforts to gain parent participation.