REQUEST FOR HEARING

TO: Director, Special Office of Education
Arkansas Department of Education

FROM: Parent or Attorney Representing the Parent

DATE:

SUBJECT: Request for a Due Process Hearing

Because agreement cannot be reached about the identification, evaluation, or educational placement of, or the provision of a free, appropriate public education to _____

(Name of Child)

a due process hearing is requested.

_____Date: _____

(Signature of Parent or Representative of the Parent)

Do you wish to participate in the mediation process? ☐ Yes ☐ No
(Information on the mediation process will be provided to you by the public agency.)

Do you wish to have an open or closed hearing? ☐ Open ☐ Closed

The record of the hearing and the Hearing Officer's decision will be provided in written form, unless you specifically request prior to the hearing that these be provided in the form of an electronic record.

Parent(s): _____ **Phone:** _____ **Fax:** _____

Address: _____

***Legal or Other Representative:** _____

Address: _____ **City:** _____ **State:** **Zip:** _____

Phone: _____ **Fax:** _____

*** ATTACH AUTHORIZATION FOR REPRESENTATIVE**

(OVER)

NOTICE OF HEARING REQUEST

The Individuals with Disabilities Education Act (IDEA) requires that the information requested below be provided upon request for a due process hearing. This information is submitted by the parent or the attorney representing the parent and must be submitted to the Director, Office of Special Education, 1401 W. Capitol, Suite 450, Little Rock, Arkansas, 72201.

_____

(Name of Child and Date of Birth)

_____

(Name of Parent) (Home Phone) (Work Phone)

_____

(Address of the Residence of the Child)

_____

(Address of the Parent if Different from Child's Address)

_____

[Name of Public Agency (School District) Child Attends]

A description of the nature of the problem of the child relating to the proposed initiation or change, including facts relating to the problem:

A proposed resolution of the problem to the extent known and available to the parents at the time:

ATTACH EXTRA PAGES IF NECESSARY