

## **Special Education Mediation and Due Process Hearing Request Form**

Important information you need to know before requesting a Special Education Mediation and Due Process Hearing:

- The law requires that the Office of Administrative Hearings, Special Education Unit encourage mediation at all stages of the hearing process as a preferred method of resolving the dispute. Therefore, a mediation conference will automatically be scheduled whenever there is a hearing request.
- Attorneys or advocates may represent parties during the mediation or hearing.
- You must serve a copy of your request on the San Diego Unified School District and any other parties named.
- The parties have 30 days to try to resolve the matter before a case will be opened by the Office of Administrative Hearings. The 30 day timeline does not begin to run until the complainant has notified the opposing party by sending a complaint which meets the requirements of the law.
- The District will set up a resolution meeting within 15 days of receipt of the complaint unless the parties agree to waive the resolution session and participate in mediation or the Office of Administrative Hearings determines that the complaint is insufficient.
- Upon receipt of notice of a request for a Mediation and Due Process Hearing, the District will send complainant Procedural Safeguards.

If you wish to file a request for a Mediation and Due Process Hearing, complete and print a copy of this Due Process Hearing Request Form (NOTE: The required information must be provided for request to be processed.) and mail or fax to:

Office of Administrative Hearings, Special Education Unit  
2349 Gateway Oaks Drive, Suite 200  
Sacramento, CA 95833  
Phone: (916) 263-0880  
Fax: (916) 263-0890

You must serve your request for Mediation and Due Process Hearing on the San Diego Unified School District to initiate the matter. It must be faxed or mailed to:

San Diego Unified School District  
Special Education Programs Division  
Due Process and Mediation Office  
4100 Normal Street, Annex 7  
San Diego, CA, 92103  
Phone: (619) 725-7794  
Fax: (619) 725-7424

## Special Education Mediation and Due Process Hearing Request Form

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**STUDENT INFORMATION:**

NAME, First and Last (Required)

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ADDRESS (Required)

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DATE OF BIRTH

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GRADE LEVEL

SCHOOL OF ATTENDANCE

(Required)

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DISTRICT OF RESIDENCE

(Required)

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## Special Education Mediation and Due Process Hearing Request Form

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**PARENT INFORMATION:**

NAME, First and Last (Required)

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ADDRESS (Required)

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HOME PHONE

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( )

WORK PHONE

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( )

FAX

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**PARTIES TO BE NAMED:**

DISTRICT OF RESIDENCE (Required)

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ADDITIONAL PARTIES

(Required)

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(Any other school district, including school of attendance, or public agency that is responsible for providing services that should be a party in the mediation and hearing.)

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**REQUESTING PARTY (Circle) (Required)**

- PARENT
- PARENT REPRESENTATIVE
- SCHOOL DISTRICT
- SCHOOL DISTRICT REPRESENTATIVE
- OTHER AGENCY

If the requesting party is not the parent, please complete the following:

NAME

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ADDRESS

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ORGANIZATION

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( )

PHONE

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( )

FAX

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**BRIEF SUMMARY OF REASON FOR REQUEST** (Describe the nature of the problem including all facts relating to the problem.) (Required)

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**PROPOSED RESOLUTION OF PROBLEM STATED ABOVE** (Required)