

INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA) Request for Mediation

Information about requesting IDEA mediation, IDEA Special Education Part B Procedural Safeguards Notice, and dispute resolution options are available on the OPI Special Education Dispute Resolution Website: https://opi.mt.gov/Educators/School-Climate-Student-Wellness/Special-Education/Dispute-Resolution/Mediation.

Use of this form is voluntary. Mediation is only available to parents and public agencies. The OPI Dispute Resolution Office is only authorized to mediate disputes involving Part B of the IDEA. Rules related to IDEA Mediation can be found at 34 CFR 300.506 and Administrative Rules of Montana 10.16.3506. Items marked with an asterisk (*) are optional.

Date of Request		
Student Information		
Name of Student:	*Grade:	*Date of Birth:
*Address:		
*City/State/Zip:		
Name of School/Public Agency Student Is Currently A		
Parent Information		
Name of Parent:		
Address:		
City/State/Zip:		
*Telephone: *I	Email:	
Local Educational Agency (LEA)/Public Agency In	formation	
Name of Representative or Contact (if known):		
Address:		
City/State/Zip:		



Summary of Issue(s) in Dispute

Describe the nature of the special education dispute.

*Mediator

Have the parties already agreed on an OPI mediator?	Yes	No	
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If yes, the parties agree to have ______ as the mediator.

If no, the OPI will mail each party a list of three mediators from its list of qualified mediators. Upon receipt of the list, the parties shall have three business days to review the list, to prioritize their selections, and to return the prioritized list to the OPI. Based on the parties' rankings, the OPI will appoint a mediator.

*Due Process

Has a due process hearing been requested? ____Yes ____No

If "Yes," please attach a copy of the due process request to this form.

Has a hearing been scheduled? ____Yes ____No If yes, what is the date of the hearing? ______

By signing and submitting this form, we are requesting mediation. We understand mediation is voluntary and may not be used to delay or deny the right to a due process hearing.

Parent Signature (required)

Date

LEA/Public Agency Administrator Signature (required)

Return form to:

Dispute Resolution Office Office of Public Instruction P.O. Box 202501 Helena, MT 59620-2501



Date

The OPI makes reasonable accommodations for persons with disabilities. If you need an alternative accessible format of notices or final report or have questions about accessibility, please contact the Dispute Resolution Office at (406) 444-2046.