



# REQUEST FOR DUE PROCESS HEARING

Under the individuals with Disabilities Education Act (IDEA) Part B and  
The Utah State Board of Education Special Education Rules, IV.G.-S.

The Individuals with Disabilities Education Act (IDEA) provides for due process hearings to resolve disputes related to the identification, evaluation, placement, or the provision of a free appropriate public education (FAPE) to a child with a disability. This form has been designed to assist you in filing a due process hearing request. You are not required to use this form; however, failure to provide required information may delay fulfillment of your request.

Hearing requested by:  Parent(s)  Local Education Agency (School District/Charter)

Is this a request for an expedited due process hearing involving a disciplinary matter?  Yes  No

A parent may request an expedited hearing only when the parent disagrees with a placement for disciplinary removals or with a manifestation determination. A district may request an expedited hearing only when the district/charter believes that maintaining the current placement is substantially likely to result in injury to the student or others.

## Students Information

Student Name	Student Date of Birth
School District/Charter School	School Student Attends
Student Address	Student Grade

## Parent Information

Parent/Guardian Name(s)	Parent/Guardian Phone
Parent/Guardian Address (if different than student)	Parent/Guardian Email

**Parent/Guardian Attorney Information (if applicable)**

Attorney Name	Attorney Phone
Attorney Address	Attorney Email

- I am also requesting mediation at this time.**  
Mediation may be requested for disputes arising under the IDEA. Mediation is free to both parties. Mediation is a voluntary process. Prior to assigning a mediator, the USBE will contact the other party to determine whether that party is willing to participate in mediation upon receipt of this request.

**Description of the Problem**

Why are you requesting a hearing? Describe the nature of the problem relating to the proposed or refused initiation or change the student’s identification, evaluation, educational placement, or provision of free appropriate public education. Include facts such as relevant dates, events, and documents. Attach separate pages if needed.

**Proposed Resolution**

Describe what you believe would be a possible solution to the problem. What do you want to accomplish by requesting this hearing? Attach separate page if needed.

**Party Requesting Due Process Hearing**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

**Filing Instructions**

This complaint and any attachments must be filed with the other party (i.e., the school district, public charter school Special Education Director or the parent). The USBE does not accept emailed complaints at this time.

A copy of this complaint and all attachments must also be mailed, faxed, or delivered in-person to:

State Director of Special Education  
Utah State Board of Education  
250 East 500 South  
PO Box 144200  
Salt Lake City, Utah 84114-4200  
Fax: (801) 538-7991

If the parties require accommodations to participate in this process, please contact the Utah State Board of Education (USBE) ADA Coordinator at (801) 538-7534 or via email at [holly.bell@schools.utah.gov](mailto:holly.bell@schools.utah.gov).