



DUE PROCESS HEARING REQUEST NOTICE (AGES 3-21) – MODEL FORM

INSTRUCTIONS

Your due process hearing request must be accompanied by a notice which includes the following information:

- Name of student and their address;
- Name of agency/district child is attending;
- Name of school student attends;
- Name and address of parent/guardian;
- Description of the nature of the problem relating to proposed initiation or change to the identification, evaluation, placement, or the provision of a free appropriate public education, and facts relating to the problem, and
- Proposed resolution of the problem to the extent known.

MAIL completed form to: Missouri Department of Elementary and Secondary Education (DESE), Office of Special Education – Compliance, PO Box 480, Jefferson City, MO 65102

FAX completed form to: 573-526-4404 (Attention: Compliance Section)

QUESTIONS: Contact the DESE’s Office of Special Education at 573-751-0602 or secompliance@dese.mo.gov.

BUSINESS HOURS: Monday – Friday 8:00 a.m. – 4:30 p.m.

Sent copy of complaint to other party (if parent, send copy to school district; if school district, send copy to parent).

OTHER LANGUAGES

If you need to communicate in a language other than English, please indicate which language you prefer

- | | | |
|----------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Russian | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Serbo-Croatian Latinic | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Somali | <input type="checkbox"/> Other: _____ |

STUDENT INFORMATION

STUDENT NAME	IS STUDENT HOMELESS? <input type="checkbox"/> Yes <input type="checkbox"/> No	COUNTY RESIDES IN (OPTIONAL)	
STREET	CITY	STATE	ZIP CODE
AGENCY/DISTRICT NAME	SCHOOL NAME		

PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN NAME	EMAIL		
STREET	CITY	STATE	ZIP CODE
PHONE (HOME)	PHONE (WORK)	PHONE (CELL)	

NATURE OF ISSUE/PROPOSED RESOLUTION

Description of the nature of the problem, including facts relating to the problem (additional pages may be attached)

Proposed resolution of problem, if known (additional pages may be attached)

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs and activities. Inquiries related to Department programs and to the location of services, activities, and facilities that are accessible by persons with disabilities may be directed to the Jefferson State Office Building, Office of the General Counsel, Coordinator – Civil Rights Compliance (Title VI/Title IX/504/ADA/Age Act), 6th Floor, 205 Jefferson Street, P.O. Box 480, Jefferson City, MO 65102-0480; telephone number 573-526-4757 or TTY 800-735-2966; email civilrights@dese.mo.gov.