MISSOURI FIRST STEPS
MEDIATION REQUEST MODEL FORM

INSTRUCTIONS

The Missouri Department of Elementary and Secondary Education (DESE) makes mediation available, at no cost, to allow the parents and either DESE, the System Point of Entry (SPOE) agency or a provider the opportunity to resolve disagreements involving any matter under Part C of the Individuals with Disabilities Education Act (IDEA) at any time. This form may be used to request mediation.

The mediation process is voluntary on the part of both parties. If both parties agree to mediation, a mediator must be mutually agreed upon from a list of qualified mediators provided by DESE.

Mail completed form to: Missouri Department of Elementary and Secondary Education
Office of Special Education
Attention: First Steps Compliance
P.O. Box 480
Jefferson City, MO 65102-0480

The Office of Special Education business hours are Monday - Friday, 8:00 AM - 4:30 PM

Or fax to: 573.751.3910 Attention: First Steps Compliance

PERSON REQUESTING MEDIATION

NAME		RELATIONSHIP TO CHILD
ADDRESS/CITY/STATE/ZIP		
PHONE (HOME)	PHONE (OTHER)	EMAIL ADDRESS

CHILD INFORMATION

NAME OF CHILD	CHILD DATE OF BIRTH
ADDRESS/CITY/STATE/ZIP	COUNTY

COMPLAINT INFORMATION

I am requesting mediation with: (check only one)

- ☐ DESE
- ☐ SPOE/Service Coordinator Name: _____
- ☐ Provider Name: _____

DESCRIPTION OF THE PROBLEM, INCLUDING FACTS RELATING TO THE PROBLEM: (ADDITIONAL PAGES MAY BE ATTACHED)

PROPOSED SOLUTION TO PROBLEM, IF KNOWN: (ADDITIONAL PAGES MAY BE ATTACHED)