

## INSTRUCTIONS FOR COMPLETING THE MEDIATION REQUEST FORM

The mediation request form should be filled out by the parent/guardian and taken to the special education director for school district/agency. The special education director or school district/agency representative will sign the form if the school district/agency agrees to mediation.

Please print or type.

1. Complete **Section I** by explaining the disagreement with the school district or agency.
2. Complete **Section II** by reading each of the statements. If you do not understand these statements, please ask for help from the special education director. For mediation to take place, both the parent/guardian and the school district/agency must agree to these statements.
3. Complete **Section III** by printing or typing in the requested information about you as the parent/guardian and the school district/agency.
4. Forms will not be accepted without the **signature** of the parent/guardian or the person requesting the mediation.
5. Fill in the date that you are making your request for mediation. If the other party made the request, then you fill in the date you agreed to participate in the mediation.
6. **Take the form to the special education director in your school district/agency.**

You can get additional information by calling the Office of Special Education Services at 803-734-8224 or the Office of General Counsel at 803-734-8783 and by going to the Department of Education's Web site at <http://www.ed.sc.gov/offices/ec/>.

# MEDIATION REQUEST FORM

## Section I (Please print or type.)

We are requesting that a mediator approved by the South Carolina Department of Education be named to help us work out the following disagreement:

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(Attach additional pages if you do not have enough room on the form.)

## Section II

- We reviewed the procedures for mediation in special education in South Carolina and understand that it is a voluntary process and not a requirement.
- We agree to meet to work out our differences in a way acceptable to each of us and in the best interest of the student.
- We understand that the student's current placement remains the same. We understand that by agreeing to mediation, neither the school district/agency nor the parent/guardian gives up the right to a due process hearing or to file a formal complaint.
- We understand that mediation is confidential and agree not to require the mediator to be a part of any future due process hearing or court proceeding. We understand that when a resolution is reached during mediation, the parties must execute a written legally binding agreement that is enforceable in any state or federal court. We understand that whatever is said or happens during mediation cannot be used in a future due process hearing or court proceeding.

## Section III (Please print or type.)

\_\_\_\_\_  
Name of school district/agency

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Signature of special education director/representative

\_\_\_\_\_  
Date of Request or Agreement to Participate in Mediation

\_\_\_\_\_  
Name of parent/guardian

\_\_\_\_\_  
Street address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Home phone Cell or Work Phone

**X** \_\_\_\_\_  
Signature of parent/guardian

\_\_\_\_\_  
Date of Request or Agreement to Participate in Mediation