Request Form

Mediation

IEP/IFSP/GIEP Facilitation

Service Information		
Today's Date:	Requested by: ☐Parent/Guardian ☐LEA (school district; charter; or IU) ☐ Parent Attorney ☐Infant/Toddler/Early Intervention ☐ LEA Attorney	
Name of Person Completing this Form:	Relationship to Student:	Phone: Email:
Preference: ☐ In Person ☐ Virtual		
Please Check the type of service requested: ☐Mediation ☐IEP Facilitation ☐GIEP Facilitation ☐IFSP Facilitation (Early Intervention)		

Student Information	
Last Name:	First Name:
Date of Birth:	Exceptionality/Disability:
Name of School/Program:	

Parent/Guardian Information	
Parent/Guardian Names:	Second Parent or Parent not residing with the Student:
Address:	Address:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Cell Phone:	Cell Phone:
Email:	Email:

Will the parent be represented by an attorney at mediation? ☐ No ☐ Yes If yes, please provide the information below.
Attorney Name:
Attorney Email:
Attorney Phone:
Attorney Address:

LOCAL EDUCATION AGENCY (LEA) INFORMATION

School District/Charter School/Agency Name:	
Address:	
Contact Name:	Position Title:
Phone:	
Fax:	
Email:	

Please provide a brief description of the issue(s) in dispute, and any proposed solutions to the problem.

Please complete this section if you are requesting any type of facilitation service.

☐ An IEP/IFSP/GIEP meeting is currently scheduled for (time, date, location):

☐ An IEP/IFSP/GIEP meeting has not yet been scheduled.

For all requests, if there is additional information you would like to provide, please enter it here.

- Parents with questions about these services or other dispute resolution options may contact the Special Education ConsultLine at 800-879-2301 or 717-901-2146.
- Any birth-3 questions should be referred to OCDEL at 717-346-9320.
- Please save a copy of this form and MAIL or EMAIL a completed form to the Office for Dispute Resolution at:

Office for Dispute Resolution
6340 Flank Drive, Harrisburg, PA 17112-2764
717-901-2145 ● Toll Free 800-222-3353 (PA only)
Email: odr@odr-pa.org