

NEVADA DEPARTMENT OF EDUCATION

Model Form to Assist a Public Agency in Filing a Due
Process Request¹

Name
Address
Telephone Number
Date
Email Address

Name of Parent(s)
Address of Parent(s)

Dear (Name of Parent(s)),

The purpose of this letter is to request an impartial due process hearing for **(name of student)**, born on (birth date), enrolled at **(name of school)**, who currently resides at **(address)**.² We are requesting this hearing in order to resolve the issue(s) of the (identification/evaluation/placement/Free Appropriate Public Education) of (name of student.)

State the nature of the problem relating to the proposed initiation or change in the identification, evaluation, or educational placement of your child, or the provision of a free appropriate public education to the child: (specific reasons for this request)

Describe the facts related to the problem:

(Describe the facts that support this request, including when the problem occurred.)

¹ Even if you do not use this model form, the Individuals with Disabilities Education Act requires the public agency or public agency's attorney to file a notice that meets certain requirements in order to have a hearing. (See the Individuals with Disabilities Education Act, 34 C.F.R. §300.508, or NAC §388.306 for the required content.)

²If the student is homeless, just include available contact information and the name of the school the student is attending

Our proposed resolution of this disagreement, to the extent known and available at the time:

(To the extent you can at the present time, please propose a resolution of the problem)

Sincerely,

(Signature of the Head of the Public Agency or Authorized Representative)

c. Nevada Department of Education (forward a copy of the due process request to the Superintendent of the Nevada Department Education at the same time it is provided to the Parent)