



# REQUEST FOR MEDIATION

Under the individuals with Disabilities Education Act (IDEA) Part B  
and the Utah State Board of Education (USBE) Special Education Rules IV.F.

I/We request that a mediator be assigned to assist in resolving the following issues (attach another sheet if necessary):

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## Student Information

Student Name	Student Date of Birth
LEA (e.g. school district or charter school)	School Student Attends
Student Address	Student Grade

## Parent/Guardian Information (if applicable)

Parent/Guardian Name(s)	Parent/Guardian Phone
Parent/Guardian Address (if different than Student)	Parent/Guardian Email

## LEA Information (Complete if LEA is Requesting Mediation)

LEA Administrator Name	LEA Administrator Title
LEA Administrator Phone	LEA Administrator Email

## General Information

Are the parties to this request already engaged in another dispute resolution process?

State Complaint Investigation       Due Process Hearing

Please indicate preferred dates and times you are available for a mediation session. Unless there is an emergency situation requiring immediate resolution, please allow approximately two weeks for the selection of a mediator and for arrangement of a mediation session.

Preferred dates/times: \_\_\_\_\_

Have you discussed your request with the other party (e.g. LEA or Parent or Adult Student)?

Yes  No

How would you prefer to attend the mediation?

In Person       Virtually       Either

When complete, submit this form and any attachments to the Utah State Board of Education (USBE) via fax, US Mail, or in-person to:

State Director of Special Education  
Utah State Board of Education  
250 East 500 South  
PO Box 144200  
Salt Lake City, Utah 84114-4200  
Fax: (801) 538-7991

- I/We know that mediation is voluntary and either party may still request a due process hearing if we cannot agree.
- I/We know that discussions during the mediation session are confidential. We agree that we will not ask the mediator to attend any other proceedings.
- I/We know that the mediator is impartial and is not providing the Parent(s), the LEA, or the Student with legal representation.
- I/We agree to try to find a solution in the appropriate interests of the Student.
- I/We understand that any agreement reached in mediation is enforceable in court.
- I/We understand that USBE will provide a mediator at no cost to the participants.

Name of Person Submitting Form	Relationship to Student
Signature	Date

If the parties have questions about this form and/or process, please contact USBE Dispute Resolution specialists Jessica Lamb at (385) 295-7873, email [Jessica.Lamb@schools.utah.gov](mailto:Jessica.Lamb@schools.utah.gov) or Cindy Poulson at (801) 538-7872, email [Cindy.Poulson@schools.utah.gov](mailto:Cindy.Poulson@schools.utah.gov).

If the parties require accommodations under the Americans with Disabilities Act (ADA) to participate in this process, please contact the USBE ADA Coordinator at (801) 538-7534 or via email at [holly.bell@schools.utah.gov](mailto:holly.bell@schools.utah.gov). If the requestor(s) are unable to file in writing, they may contact the LEA or State Director of Special Education for assistance. This form has been designed to assist you in requesting mediation. You are not required to use this form.