

If you are using a browser other than Internet Explorer, you may need to save the form to your desktop and attach it to an email addressed to mde.adrservices@state.mn.us. Instructions can be found on last page.



Request for Facilitated Team Meeting

Has the district proposed an IEP? Yes No *(If yes, you may want to consider mediation.)*

Our last IEP* team meeting was on (date) _____.

Date of last conciliation meeting, if any have been held. _____

District Information

School District Name _____ ISD No. _____

Administrator Name _____ Title _____

Address _____

City _____ State _____ Zip Code _____

Phone Number _____ Email Address _____

Student Information

Student Name _____ Date of Birth _____

Grade _____ Disability _____

Parent/Guardian Name(s) _____

Address _____

City _____ State _____ Zip Code _____

Daytime Phone _____ Alt. Phone _____ Email Address _____

Facilitated Team Meeting Conditions

- Using a facilitator is voluntary and cannot be used to delay or deny the parent's right to a due process hearing.
- The goal is to write an acceptable IEP that focuses on the needs of the child.
- The facilitation will occur only if the required team members are present or excused appropriately.
- Participants may not call the facilitator to testify in any subsequent proceedings.
- MDE will provide a facilitator, at no cost to the participants, to assist schools and parents in reaching consensus on an IEP.

*All references to the individualized education program (IEP) in this document also include the multi-agency plan and the individual family service plan (IFSP).

To be Filled out by Parent(s)

Today's Date _____

Is communication between the parent and educators difficult? ___ Yes ___ No

If yes, please explain.

We have concerns about the following areas of the IEP (check all that apply).

- | | |
|--|---|
| <input type="checkbox"/> identification, evaluation | <input type="checkbox"/> accommodations/modifications |
| <input type="checkbox"/> present levels of education performance | <input type="checkbox"/> placement |
| <input type="checkbox"/> goals and objectives | <input type="checkbox"/> discipline/behavior |
| <input type="checkbox"/> services | <input type="checkbox"/> transition |
| <input type="checkbox"/> related services | <input type="checkbox"/> implementation of IEP |
| <input type="checkbox"/> assistive technology | <input type="checkbox"/> progress reporting |

Advocate Information

Have you been in contact with an advocate? ___ Yes ___ No

Advocate Name and Agency _____

Telephone Number _____ Email _____

ADR Services and the advocate **may** share information.

ADR Services and the advocate **may not** share information.

Parent Authorization (required to begin ADR services)

I, _____ (parent name) understand the conditions of the facilitated team meeting and have the authority to make this request. I agree to participate in the meeting.

I authorize School District # _____ and its employees, agents and contractors to share information with ADR Services about our child's identity, needs, and issues surrounding disagreements about educational programming.

To be Filled Out by District

Today's Date _____

Is communication between the parent and educators difficult? ___ Yes ___ No

If yes, please explain.

We have concerns about the following areas of the IEP (check all that apply).

- | | |
|--|---|
| <input type="checkbox"/> identification, evaluation | <input type="checkbox"/> accommodations/modifications |
| <input type="checkbox"/> present levels of education performance | <input type="checkbox"/> placement |
| <input type="checkbox"/> goals and objectives | <input type="checkbox"/> discipline/behavior |
| <input type="checkbox"/> services | <input type="checkbox"/> transition |
| <input type="checkbox"/> related services | <input type="checkbox"/> implementation of IEP |
| <input type="checkbox"/> assistive technology | <input type="checkbox"/> progress reporting |

District Authorization (required to begin ADR services)

I, _____ (district representative) understand the conditions of the facilitated team meeting and have the authority to make this request. I agree that the district will participate in the meeting.

___ I agree to submit the Notice of Team Meeting to ADR Services as soon as the district has scheduled the IEP Meeting.

District Contact Information

Special Education Director or Coordinator _____

Phone Number _____ Email Address _____

Form Instructions – Request for Facilitated Team Meeting

1. Fill out the information that pertains to you.
 - a. Save the form on your computer and e-mail it as an attachment to the other party (parent or district) to complete and email to ADR Services; or
 - b. Email the form directly to ADR Services by selecting “**Email Form**” button in the top, right corner of the first page of the form. If you are using a browser other than Internet Explorer, you may need to save the form to your desktop and attach it to an email addressed to mde.adrservices@state.mn.us. The ADR Coordinator will then contact the other party to see if there is willingness to participate in a facilitated team meeting.
 - c. Include additional pages if necessary.
2. If parties fill out this form together, the school district will forward the completed form to ADR Services.
3. Upon receipt of the completed form, the district will schedule an IEP meeting and forward the Notice of Team Meeting to ADR Services. The notice will include the date, time, place and address of the meeting. Upon receipt of this information, the ADR coordinator will need seven days to assign a facilitator and send confirmation materials.
4. For additional information, contact Pamela Hinze, ADR Coordinator, at 651-582-8518; pamela.hinze@state.mn.us; Fax: 651-582-8498. For TTY communication, contact the Minnesota Relay Service: 1 800-627-3529.

Alternative Dispute Resolution Services
Minnesota Department of Education
1500 Highway 36 West
Roseville, Minnesota 55113
mde.adrservices@state.mn.us

Alternative Dispute Resolution (ADR) Services' Vision of Success

- The ADR professionals lead a culturally sensitive, fair, and just process. They encourage parents and educators to...
 - Focus on students.
 - Work toward solutions.
 - Be partners.
 - Communicate.
 - Trust and respect each other.
 - Create an IEP that works for the student.
 - Recognize, respect, and honor differences.
 - Keep the discussion going after the ADR process ends.
- Parents and educators feel at peace and are satisfied with their ADR process.
- If students attend, they are comfortable talking about what they need.