



# Request for Special Education Expedited Due Process Hearing

Indiana Department of Education  
Office of Special Education  
115 W Washington St  
South Tower Ste 600  
Indianapolis, IN 46204  
Telephone: (317)233-2131  
Toll Free: 1-877-851-4106  
Fax: (317)232-0589

<https://www.doe.in.gov/specialed/special-education-due-process-hearings-expedited-511-iac-7-45-10>

**INSTRUCTIONS:** Form may be completed electronically, but must be printed and must include a hand written signature. Please mail or fax a copy to the Office of Special Education, and mail or fax to the opposing party..

## STUDENT INFORMATION

Name of Student:  Student's Address:  City:

State:  Zipcode:  Gender:  Date of Birth(M/D/Y):  Age:  Grade:

Name of Parent/Guardian:  Email:

Address:  City:  State:  Zipcode:

Home Number:  Work Number:  Cell Number:

Name/Address of Attorney Representing Student and Parent/Guardian: (If this section is completed, all information and correspondence regarding due process will be forwarded to the attorney.)

Telephone Number:

Fax Number:

## SCHOOL INFORMATION

Name of School Student Attends:

Name of Superintendent, School Corporation or Charter School and Address/Telephone/Fax:

Name of Attorney for School Corporation or Charter School and Address/Telephone/Fax:

I am requesting an **expedited** due process hearing on the following issue(s) 511 IAC 7-45-10:

- The parent disagrees with a determination that the student's behavior was not a manifestation of the student's disability.
- The parent disagrees with the public agency's decision regarding the student's disciplinary change of placement.

You must include/provide the facts relevant to the dispute. (Space below is limited to 21 lines. Attach additional pages as necessary.)

Briefly explain the resolution you are seeking. (Space below is limited to 21 lines. Attach additional pages as necessary.)

Printed Name

Signature

Date

**Note: Form may be completed electronically, but must be printed and must include a hand written signature. Requests received without written signature will NOT be processed.** Completed form may be mailed and/or faxed simultaneously to the: Indiana Department of Education, Office of Special Education, 115 W Washington St., South Tower Ste 600, Indianapolis, IN 46204, Fax number - 317/232-0589; and mail or fax to the opposing party.