

## Request for AEA Resolution Facilitator Process

I, \_\_\_\_\_, am requesting an AEA Resolution Facilitator Process.

\_\_\_\_\_  
**Child's name** (if appropriate)

\_\_\_\_\_  
**Parent's name**

\_\_\_\_\_  
**Address of child's residence**

\_\_\_\_\_  
**Parent's address**

\_\_\_\_\_  
**Child's resident district, school, and AEA Parent's phone number**

(Also, the district child attends, if different)

**Is there another parent at another address with parental rights?**     Yes     No

**Describe the following** (use additional sheets of paper if more space is needed).

1. The nature of your concern:

2. The facts relating to your concern:

3. Your proposed resolution of the concern:

4. What have you already tried to resolve your concern?

Send the completed form to: AEA Resolution Facilitator Coordinator (your local AEA office)