

Mediation Tracking Report

Mediation Case Number

Mediator

Date Assigned

Active Complaint:

Yes No

Due Process Case #: _____

Due Process Hearing Officer: _____ phone #: _____

State Complaint Case #: _____

State Complaints Officer: _____ phone #: _____

Mediation Outcome:

Mediation not held

Complete Resolution of the dispute Date: _____

Impasse, no agreement* Date: _____

Partial resolution of the dispute Date: _____

If there is an active Due Process or State Complaint, what allegations remain unresolved?

NOTE: All Settlement Agreements (i.e., full or partial) must be reduced to writing and signed by both parties.

***A verbal or unsigned Settlement Agreement constitutes an impasse.**

Mediator Assurances:

1. Mediator has returned to each party all documentation provided by the party;
2. Mediator has destroyed all notes, records, copies, or electronic records regarding the mediation;
3. **At the conclusion of the mediation, Mediator immediately notified the State Complaints Officer or the Impartial Due Process Hearing Officer as to the status of the mediation outcome and any unresolved issues; and**
4. Mediator has submitted this form to the CDE, by fax, within two (2) business days of the conclusion of mediation.

I assure that items #1-4, above, have been completed.

Mediator Signature

Date