



Oregon Department of Education IEP Facilitation Request Form

How did you hear about the Facilitated IEP process? _____

Person or entity requesting the FIEP: _____

Parent(s) District Adult student Other: _____

Last IEP team meeting held (date) ___/___/___ Last evaluation conducted ___/___/___

Type of IEP: Initial Annual Other: _____

I/We have concerns about the following areas:

- | | | |
|--|------------------------------------|-------------------------|
| _ Identification/Reevaluation | _ Independent Education Evaluation | _ Placement |
| _ Present level of education performance | _ Accommodations/modifications | _ Transition |
| _ Goals and/or objectives | _ Related Services | _ Discipline/behavior |
| _ ESY Services | _ Assistive technology | _ Implementation of IEP |
| _ Progress Reporting | _ Other: _____ | |

Student Name		
Parent/Guardian(s) Name		
Mailing Address	Preferred Phone Number Home: Cell:	
Email	Primary Home Language	
District	School	Grade Level
Is this child receiving special education services? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Birth

With whom have you discussed this concern before now?

General Education teacher Special Ed teacher Administrator Special Ed Director

Who is the case manager/special education teacher assigned to your student? _____

Authorization to Release Educational Data

By agreeing to participate in a facilitated IEP meeting, I am authorizing _____ School District and its employees, agents and contractors to share information with the Oregon Department of Education and the assigned facilitator about my child's identity, needs and issues surrounding disagreements about educational programming. I understand that this information will be kept confidential.

Date: _____ Parent/Guardian: _____

Date: _____ Parent/Guardian: _____

A facilitated IEP meeting will not be held until ODE receives this signed authorization.

To Request a Facilitated IEP Meeting

Instructions

1. Four weeks prior to the IEP date, complete the form with all required information. This form must be completed by the district and the parent. Parent must sign the authorization to release educational data.
2. Parents can submit the form independently or the district may submit the form on behalf of the parent.
3. Submit the form via fax or mail directly to the Oregon Department of Education Dispute Resolution Team and an Education Specialist will review the form for completeness.
4. Once the ODE receives the request form signed by both parties, the Education Specialist will review the concerns of the IEP team and research any needed background information. If the Education Specialist is able to verify that both parties have not reached an impasse and are open to discussion, a facilitator will be assigned and both parties will be notified. The facilitator will contact the district to schedule the facilitated IEP meeting.

For additional information, contact:

Molly Hammans
molly.hammans@state.or.us
503-947-5705 or Fax: 503-378-5156

Dispute Resolution Team
Oregon Department of Education
255 Capitol St. NE
Salem, OR 97310-0203

FIEP Information for Requesting Party

The Oregon Department of Education provides a facilitator, at no cost to the participants, to assist schools and parents in reaching a consensus on the development of an IEP.

- The goal of the facilitated IEP process is to develop a comprehensive IEP that allows the provision of a Free and Appropriate Public Education
- The facilitation will only take place if the required team members are present
- Using a facilitator is voluntary and cannot be used to delay or deny the rights of the parent or student to a due process hearing
- The facilitator will NOT be called to testify in any subsequent hearings

Accommodations for Participants

Does the parent or student need accommodations in order to participate in this process? Yes No

If yes, please specify _____

It is the policy of the State Board of Education and a priority of the Oregon Department of Education that there will be no discrimination or harassment on the grounds of race, color, religion, sex, marital status, sexual orientation, national origin, age or disability in any educational programs, activities or employment. Persons having questions about equal opportunity and nondiscrimination should contact the Deputy Superintendent of Public Instruction at the Oregon Department of Education, 255 Capitol Street NE, Salem, Oregon 97310; phone 503-947-5740; or fax 503-378-4772.