



Oklahoma State Department of Education
DUE PROCESS COMPLAINT NOTICE – LEA

To:

_____ Address: _____
(Parent/Guardian) (Street)

_____ _____
(School District) (City, State, Zip Code)

CHILD'S INFORMATION

Child's Name: _____ School: _____

Address of Child's Residence:

_____ Current Grade/Placement: _____
(Street)

_____ Date of Birth: _____
(City, State Zip Code)

Disability: _____

DUE PROCESS REQUEST

Local Educational Agency: _____

Address:

_____ Telephone: _____
(Street)

_____ _____
(City, State, Zip Code)

(Continued on next page)



Describe the nature of the problem(s) of the child relating to the proposed initiation or change of identification, evaluation, placement, or appropriateness of the education of your child, including specific facts relating to such problem which make this hearing necessary. (Attach additional pages if necessary.)

How may the problem(s) be resolved?

Parents have the right to request mediation to resolve this problem. Such participation is voluntary. Please contact the school or the Oklahoma State Department of Education at (405) 521-3351 for further information. The due process hearing timeline does not begin until the complaint notice, completed in accordance with all requirements, is received by both the parent and the Oklahoma State Department of Education, Office of Special Education Services. A copy of the notice must be mailed or faxed to:

Oklahoma State Department of Education

Attn: Office of Special Education Services
2500 North Lincoln Boulevard, Suite 412
Oklahoma City, OK 73105-4599
Fax: (405) 522-3503



**OKLAHOMA
Education**

Signature

Date