

PLEASE PRINT CLEARLY OR TYPE

(* Required information)

STATE OF NORTH CAROLINA

IN THE OFFICE OF
ADMINISTRATIVE HEARINGS
_____ EDC _____

COUNTY OF (1) _____

(2) _____ by parent)
(Student's name))
or guardian _____)
PETITIONERS,)
v.)
(3) _____)
(Name of county, city or charter)
Board of Education)
RESPONDENT.)

**PETITION FOR A
CONTESTED CASE HEARING
(Special Education)**

(4*) Name of school or charter school that student attends _____

(5*) Student's Name _____ (6) Student's Birthdate _____

(7*) Student's Home or Residence Address _____
(Street Address) (City) (State) (Zip) (County)

I hereby petition for a due process contested case hearing as provided for by the Individuals with Disabilities Education Act, (20 U.S.C. 1400 et seq.) North Carolina General Statute §115C-116 and Article 3 of Chapter 150B of the General Statutes.

(8) My Petition is based upon a dispute regarding the following: (Check all that apply.)

- _____ The *Identification* of my child as a student with a disability needing special education;
- _____ The *Evaluation* to determine whether my child has a disability under IDEA and/or the nature and extent of the special education and related services the student needs;
- _____ The educational *Placement* of my child in special education or related services under IDEA;
- _____ My child has been denied a *free, appropriate, public education*;
- _____ Other (please elaborate on a separate sheet.)

(9*) Describe the problem and the facts that support your Petition: (Attach additional pages if more space is needed.)

(10*) Describe the resolution or remedy you are seeking: (Attach additional pages if necessary)

Parent or Guardian Information

(11) Date: _____ (12) Your phone number: (_____) _____

(13) Print your full address: _____
(Street Address/p.o. box) (City) (State) (Zip) (County)

Email address: _____

(14) Print your name: _____

(15) Your signature: _____

You must mail or deliver a **COPY** of this Petition to the Superintendent of the Board of Education **or** the Director of Special Education (Exceptional Children's Director) of the local school system. The name, address and phone number of the Superintendent and Director of Special Education may be obtained by asking the Principal at your child's school. **You must also** send a copy of this form to Consultant for Dispute Resolution, Exceptional Children's Division of the NC Department of Public Instruction, 6356 Mail Service Center, Raleigh, NC 27699-6356, by fax at 919/807-3243, or by email to Due_Process@dpi.nc.gov.

CERTIFICATE OF SERVICE

I certify that this Petition has been served on the Local or County Superintendent of Schools or the Director of Special Education, named below by depositing a copy of it with the United States Postal Service with sufficient postage affixed **OR** by hand delivering it to the person named below.

(20) _____ (21) _____
(Name of Superintendent or EC Director served) (School board listed on line 3)

(22) _____
(Street address/PO box) (City) (State) (Zip)

(23) _____ (24) Date: _____
(Your signature or initials)

This form has been developed to assist parents, or guardians in petitioning for an impartial due process contested case hearing.

When you have completed this form you MUST mail or deliver the ORIGINAL AND ONE COPY to the Office of Administrative Hearings, 6714 Mail Service Center, Raleigh, NC 27699-6714 or 1711 New Hope Church Road, Raleigh, NC 27609.

INSTRUCTION FOR FORM H-06E-A
“PETITION FOR A CONTESTED CASE” AND “CERTIFICATE OF SERVICE”

PLEASE PRINT CLEARLY OR TYPE

You are completing a contested case petition for a hearing (sometimes referred to as a "due process hearing") on a special education case. A hearing is designed to resolve legal disputes between parents of children with disabilities and school systems concerning identification, evaluation, placement, a manifestation determination, and/or the denial of a free appropriate public education (FAPE). The petition starts a proceeding against the school board. At the hearing an independent administrative law judge will determine the facts and law supporting your allegations about the educational services provided or not provided to your child. Normally, you have the burden of proving that the school board has violated the law and you must provide evidence and witnesses to support your allegations.

FILL IN BLANKS:

Fill in your county of residence on line (1). Special education cases are confidential and the Office of Administrative Hearings will not disclose your identify or that of your child, without authorization. Print the name of the student and guardian on line (2). Print the name of the school board about which you are complaining on line (3). Print the name of school or charter school that the student attends on line (4). Enter student's name on line (5); student's birth date on line (6); and the address of the student's home or residence on line (7).

In section (8) describe the problem and state the facts that support your Petition using additional pages if needed; and in section (9) describe the resolution or remedy you are seeking as a result of this contested case (additional pages may be attached if needed).

Enter the date on line (10), your telephone number on line (11), your address on line (12), print your name on line (13), and sign the petition on line (14).

All asterisked (*) information on this form must be included when you submit a Petition for a Contested Case Hearing to request an impartial hearing.

CERTIFICATE OF SERVICE:

You must mail or hand deliver a copy of your completed petition to the school board named on line (3) and complete the “Certificate of Service” section on your petition, entering the name of the Superintendent or the Director of Special Education of the school board to whom you mailed or delivered the petition on line (15). The name, address and phone number of the Superintendent and Director of Special Education may be obtained by asking the Principal at your child’s school. Print the name of the school board on line (16), the address of the school board on line (17), sign your name on line (18) and enter the date on line (19).

Your contested case will commence or begin upon the other party’s receipt of the petition.

FILING YOUR PETITION WITH THE OFFICE OF ADMINISTRATIVE HEARINGS:

File your completed **original** petition, along with a **copy**, properly signed, with the Office of Administrative Hearings. Below are the mailing and physical addresses:

**Office of Administrative Hearings
6714 Mail Service Center
Raleigh NC 27699-6714**

**Office of Administrative Hearings
1711 New Hope Church Road
Raleigh, NC 27609**

You may file your petition by fax during normal business hours by faxing the petition to the Clerk's Office at (919) 431 3100.

You may file your petition by electronic mail by an attached file either in PDF format or a document that is compatible with or convertible to the most recent version of Word for Windows by sending the electronic transmission to oah.clerks@oah.nc.gov. Electronic mail without attached file shall not constitute a valid filing.

OAH **must receive the original signed Petition and one copy** within **seven business days** following the fax or electronic transmission for the petition to be deemed "filed" on the fax or electronic transmission date.

In addition to the above, you must also send a copy of this form to Due Process Hearing Coordinator, Exceptional Children's Division of the NC Department of Public Instruction, 6356 Mail Service Center, Raleigh, NC 27699-6356, by fax at (919) 807-3755, or by email to Due_Process@dpi.nc.gov.

If you have any **questions** about how to complete this petition form, you should contact an attorney or call the North Carolina Department of Public Instruction, Exceptional Children's Division at (919) 807-3969.
