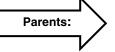


## Facilitated Individualized Education Program (FIEP) Team Meeting Request Form

"A Collaborative Dispute Prevention and Resolution Option"



\*Complete and submit one (1) signed copy of this form to the Special Education Director in your child's school district. You may wish to retain a copy for your records.



\*Submit the signed FIEP Team Meeting Request Form and a copy of the fully executed IEP Team meeting notice to: Georgia Department of Education
Division for Special Education Services and Supports
205 Jesse Hill Jr. Drive, SE

205 Jesse Hill Jr. Drive, SE 1870 Twin Towers East Atlanta, Georgia 30334 eFax: 770-344-4458

Email: SPEDhelpdesk@doe.k12.ga.us

Attention: FIEP Request

\*Electronic submissions are strongly encouraged\*

## Instructions

- Either a parent or school district may initiate the facilitated IEP Team meeting process. The school district will submit the completed form by emailing, faxing, or mailing the signed form to the Georgia Department of Education (GaDOE), Division for Special Education Services and Supports, 205 Jesse Hill Jr. Drive, SE, 1870 Twin Towers East, Atlanta, Georgia 30334, eFax (770) 344-4458 or email SPEDhelpdesk@doe.k12.ga.us Attention: FIEP Request. Both the parent and school district may jointly complete one form.
- 2. Parties should contact the GaDOE at least 7-10 days prior to the IEP Team meeting. Both parties must agree to the facilitated IEP Team meeting in order for the process to take place.
- 3. Once a **completed request form** and **IEP Team meeting notice** is provided, the GaDOE Family Engagement and Dispute Resolution Team will assign a facilitator for the IEP Team meeting from a list of trained professionals and keep the parties notified about the progress of the request.

## We understand the following:

- 1. We are requesting that the GaDOE Family Engagement and Dispute Resolution Team assign an IEP Team Meeting Facilitator.
- 2. We understand that the GaDOE provides a facilitator at no cost to parents or school districts.
- 3. We understand that the signing of this request gives the facilitator access to student records during the facilitation process.
- 4. We understand that the facilitator is not a member of the IEP Team.
- 5. We understand that the facilitator cannot provide legal or financial advice to any participant.
- 6. We understand that participation in this process is voluntary and does not prevent the participants from utilizing the IDEA dispute resolution options (i.e., formal complaint, mediation, and due process hearing).
- 7. We understand that, by completing the evaluation form at the conclusion of the facilitated IEP Team meeting, we are supporting the continuous improvement of the FIEP Team meeting processes and procedures.







## Facilitated Individualized Education Program (FIEP) Team Meeting Request Form

Richard Woods, Georgia's School Superintendent "Educating Georgia's Future" "A Collaborative Dispute Prevention and Resolution Option"

Name of Studen		Grade of Student		Date of Birth			
Name of State School			Name of Home School District				
Name of State Schools Assistant Director			Name of Parent/Guardian				
Ms. Jan E. Stevenson							
Address	Address						
Suite 1566B Twin Towers East 205 Jesse Hill Jr. Drive, S.E.							
City	State	Zip	City		State	Zip	
Atlanta Contact	GA Work	30334 Cell	Home		Work	Cell	
Numbers	404-232-1503	678-885-0478					
Email			Email				
jstevenson@doe.k12.ga.us							
Who initiated this Facilitated IEP Team meeting request? ☐ Parent ☐ School District							
An IEP Team meeting is currently scheduled for:							
Date							
Time							
Location							
Purpose							
Required Signatures: We understand that a Facilitated IEP Team meeting is a voluntary alternative dispute							
resolution option. We understand and agree to the seven (7) items listed on page one of this request form.							
Signature of Parent/Guardian					Date Signed		
Signature of Special Education Director					Date Signed		
Signature of State Schools Director					Date Signed		

Submit the signed FIEP Team Meeting Request Form and copy of the fully executed IEP Team meeting notice to:

Division for Special Education Services and Supports 205 Jesse Hill Jr. Drive, SE, 1870 Twin Towers East Atlanta, Georgia 30334

eFax: 770-344-4458 or Email: spedhelpdesk@doe.k12.ga.us

Attention: FIEP Request

\*Electronic submissions are strongly encouraged\*