



RESOLUTION SESSION AGREEMENT

DEPARTMENT OF PUBLIC INSTRUCTION
OFFICE OF SPECIAL EDUCATION
SFN 61013 (12-2015)

Student Name	Date of Birth	Date of Resolution Session	Location of Resolution Session
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Issues(s) stated in Due Process Complaint Notice

Previous attempts to resolve issue(s)

Participant List (please print)

Parent(s)/Guardian(s)	School District Representative(s)
Adult Student (when applicable)	Resolution Session Facilitator
Relevant member(s) of IEP team and their relationship to the student	

If parties execute a written settlement agreement, the agreement is considered legally binding and enforceable in any state court of competent jurisdiction. Either party may void the agreement within three business days of the agreement's execution. Sec. [615(f)(1)(B)(iii-iv)]

Terms of Agreement: The parties understand that the Resolution Session is not an IEP meeting and that the meeting should focus on only those issues presented in the Due Process Complaint Notice. The neutral facilitator's role is not to provide solutions. The facilitator will assist the parties in reaching their own agreement. The agreement is only valid if both parties sign the agreement signifying they agree to the terms. The parties understand that this session is not a substitute for independent legal advice. The parties understand that an attorney may attend on behalf of the School district only if the parent is accompanied by an attorney. The parties understand that the facilitator cannot render individual legal advice to any party. This agreement is, however, considered a legally binding document.

Unlike mediation, IDEA 04 does not prohibit the resolution session discussion, records or notes from being used in future proceedings such as due process hearings. The agreement will be outlined in the space below and duplicates will be given to the parent(s) and the district.

Summary of Agreement. Answer the following questions relevant to each agreement issue (Be Specific): To what complaint issue is the particular agreement tied? How will it be implemented or carried out? Who is responsible for carrying it out? What are the associated timelines? If services are to be rendered on a trial basis, what happens at the end of the trial? Provide specific if/then scenarios. (Use additional pages if necessary).

This resolution agreement is in effect for (select one)

- Time specified in the agreement
 School year in question
 Until circumstances change as determined by the IEP team

Signature of Parent/Guardian OR Adult Student	Typed Name of Parent/Guardian OR Adult Student	Date
Signature of School Representative	Typed Name of School Representative	Date
Signature of Resolution Session Facilitator	Typed Name of Resolution Session Facilitator	Date

Please mail to:

Dispute Resolution Coordinator
 Department of Public Instruction
 Office of Special Education
 600 E Blvd Ave, Dept 201
 Bismarck, ND 58505-0440