



Tennessee Department of Education Due Process Hearing Request Form

Office of General Counsel
9th Floor, Andrew Johnson Tower
710 James Robertson Parkway
Nashville, Tennessee 37243

Email completed forms to the school district and dispute.resolution@tn.gov

Parent/Child Information (To be completed by the parent/guardian and submitted to the LEA for processing)			
Name of Child	Child's Date of Birth <i>Month/Day/Year</i>	Child's Disability	
Name of Parent/Guardian		Address of the Child/Parent/Guardian <i>Street, City, State, ZIP</i>	
Phone	Email Address	School Child is Attending	
Attorney for Child/Parent/Guardian		Address of Attorney <i>Street, City, State, ZIP</i>	
Phone	Fax	Email Address	
Due Process Hearing Request initiated by: <div style="display: flex; justify-content: space-around;"> Parent/Guardian LEA (LEA shall provide parent information when initiating the hearing) </div>		Hearing is to be: <div style="display: flex; justify-content: space-around;"> Open Closed </div>	
Provide a complete description of the nature of the problem relating to the identification, evaluation, educational placement (initial or proposed change) or the provision of a free appropriate public education (FAPE).			
Please provide a proposed resolution to the problem to the extent known and available.			
Local Education Agency (LEA) Information (To be completed by the school district)			
LEA/Special Education Administrator		Address of LEA <i>Street, City, State, ZIP</i>	
Phone	Fax	Email Address	
School Child Attends/Attended		Child's Disability	
Attorney for LEA		Address of Attorney <i>Street, City, State, ZIP</i>	
Phone	Fax	Email address	
Date Request Received by LEA		Hearing Location	