Oregon Department of Education
255 Capitol Street NE
Salem, OR 97310-0203

Office of Learning - Student Services
Dispute Resolution Section
(503) 947-5689

TO: Claudette Rushing
Legal Specialist
Office of Learning - Student Services
255 Capitol St NE
Salem OR 97310

RE: Due Process Hearing #_____

Request for ALJ Settlement Conference by Both Parties

We request an ALJ settlement conference. We understand both parties must agree to participate in an ALJ settlement conference and we are not required to pursue an ALJ settlement conference before a hearing. We have read a description of the ALJ settlement conference procedures and our consent is knowing and voluntary.

_____ _____ _____ _____
Parent Signature Date School Dist. Representative Date

_____ _____
Legal Representative Legal Representative

_____, _____
Two mutually agreeable dates for the ALJ settlement conference:

Please forward to the above address.

Request for ALJ Settlement Conference by One Party

I request an ALJ settlement conference. I understand both parties must agree to an ALJ settlement conference and I am not required to pursue this option before a hearing. I have read a description of the ALJ settlement conference procedures and my consent is knowing and voluntary.

_____ _____
Signature Date

_____
Legal Representative

Please forward to the above address and to the other party at the same time.

I agree to participate in the ALJ settlement conference. I understand both parties must agree to an ALJ settlement conference and I am not required to pursue this option before a hearing. I have read a description of the ALJ settlement conference procedures and my consent is knowing and voluntary.

I suggest the following date(s) for the Advisory Opinion Process:_____

_____ _____
Signature Date

_____ _____
Legal Representative Date