



## Model Due Process Request Form America Samoa Department of Education

### Purpose

This model form may be used by a parent or public agency to submit a request for a due process hearing to resolve a disagreement about: the identification; evaluation; eligibility; educational placement; the provision of a free appropriate public education; or discipline decisions of a student under the Individuals with Disabilities Education Act (IDEA). The use of this form is not required to file a due process request, but rather it is provided as an option to assist in filing a due process complaint.

### Instructions

The due process complaint must allege a violation that occurred not more than two years before the date the parent or public agency knew or should have known about the alleged action that forms the basis of the due process complaint. Complete this form and deliver by mail, electronically (email), or hand-deliver it to the ASDOE Special Education Division. Contact information for the ASDOE Special Education Division is located at the end of this form.

**Note:** The \* indicates required information.

## Complainant Contact Information

<b>Full Name:</b>		
<b>Email:</b>	<b>Phone Number:</b>	
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>

## Student Information

<b>*Full Name:</b>	<b>Age:</b>	<b>Date of Birth:</b>
<b>*Address:</b>		<b>Grade:</b>
<b>*City:</b>	<b>*State:</b>	<b>*Zip Code:</b>
<b>*Name of the school the student attends:</b>		

## Complainant Contact Information (if other than the person filing the complaint)

<b>Full Name:</b>	
<b>Email:</b>	<b>Phone Number:</b>

### \*Problem and Facts

**What is the nature of the problem that relates to the student’s special education program and what are the facts that relate to the problem? Include dates, if known. (Attach additional pages if necessary.)**

### \*Proposed Resolution

**To the extent known, briefly explain how you think the issue could be resolved. (Attach additional pages if necessary.)**

## Submit Due Process Complaint/Request for Hearing

The due process complaint/request for hearing must be signed and submitted to the ASDOE Special Education Division via mail, hand delivery, or electronically (fax, email). A copy of this state complaint must also be sent to the public agency serving the child.

<b>Signature:</b>	
<b>Printed Name:</b>	
<b>Date:</b>	

### ASDOE Special Education Division Contact Information

<p><b>ASDOE Contact:</b> Leilani Maifea, Compliance Officer</p> <p><b>Address:</b> ASDOE Special Education Division Fagaalu, American Samoa 96799</p> <p><b>Phone Number:</b> 684-633-1323 or 684-633-4789</p> <p><b>Email:</b> <a href="mailto:asdoe.speddr@doe.as">asdoe.speddr@doe.as</a></p>
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