



Illinois State Board of Education

Special Education Department

ILLINOIS STUDENT RECORD KEEPER

FOR PARENTS OF STUDENTS WHO
RECEIVE SPECIAL EDUCATION SERVICES

May 2021

Student's Name _____

Date _____

20____ to 20____ School Year

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HELLO AND WELCOME!

How to Use This Book

This booklet is for you to use to keep important information about your child and his or her special education and related services. It is a companion to *Educational Rights and Responsibilities: Understanding Special Education in Illinois*, otherwise known as the parent guide.

Records play an important role as you plan your child's education. Dates, people, meetings, and reports are important throughout your child's educational career. The records keeper was developed to assist you in preparing for Individualized Education Program (IEP) and transition meetings, getting ready for evaluations and reevaluations, and keeping track of paperwork and other materials you might need.

This book cross-references the Illinois State Board of Education (ISBE) publication, *Educational Rights and Responsibilities: Understanding Special Education in Illinois*. At the top of each section, locate the page numbers that reference pages in the guide.

The guide can be found at <https://www.isbe.net/Documents/Parent-Guide-Special-Education-Aug20.pdf> The guide offers information to increase your knowledge and understanding about a variety of topics and issues related to special education in Illinois.

If you have any questions about special education and/or related services, call a consultant at the Special Education Department at (217) 782-5589. The ISBE Special Education website also has many resources and is located at <https://www.isbe.net/Pages/Special-Education-Programs.aspx>.



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Identifying Information for 20__ - 20__ School Year

Child's Name: _____

Child's Date of Birth: _____

School District: _____

School Attending: _____

School Telephone Number: _____

School Principal: _____

Dates for This Year's IEP Meeting(s):

--

My Student's Teachers This Year:

(include names of persons who work with your child such as a speech therapist, social worker, etc.)

General Education Teachers	Special Education Teachers

Make a file and keep copies of any papers you receive during your meetings with the school. If you aren't given copies of reports that you want, ask for them. Then keep the papers in your file.

Things to Think About Before Your Child's Individualized Education Program (IEP) Meeting

My child's strengths at home are -

My child's strengths at school are -

A few things my child likes to do are -

A few things my child does not like to do are -

My child is good at -

**Things to Think About Before Your Child's
Individualized Education Program (IEP) Meeting (*cont.*)**

My child needs help with -

The problems my child has at home are -

The problems my child has at school are -

The concerns I have for my child's education are -

How do I think my child feels about himself or herself?

**Things to Think About Before Your Child's
Individualized Education Program (IEP) Meeting (*cont.*)**

How does my child feel about school?

I think the things my child needs to learn the most in school are -

The supports my child needs to be successful in school are -

The technology my child needs to learn or to show what he or she knows is -

My dreams for my child are -

**Things to Think About Before Your Child's
Individualized Education Program (IEP) Meeting (*cont.*)**

Other thoughts, concerns, or ideas about my child's education:

Things to Think About Before the Transition Portion of the IEP Meeting

What does my child like to do when he or she has free time?

What are his or her hobbies ?

What kinds of paying jobs has my child done or would like to do?

What kind of volunteer work has my child done or would like to do?

Is my young person interested in going to college or trade school or joining the military after high school?

What services does my child receive from state or community agencies?

Things to Think About Before the Transition Portion of the IEP Meeting

What services or supports do I think my child needs from state or community agencies?

My child is aware of different types of jobs available in our community.

Yes No

Explain:

What kind of jobs or career choices would my child like to have?

Where would you like to see your child living and working five years from now?

Where does your child want to be living and working five years from now?

Things to Think About Before the Transition Portion of the IEP Meeting

What supports does your child need to prepare him or her for -

- working with adult services?
- college?
- vocational training?
- a job or career?
- living independently in the community?
- advocating for himself or herself?

Does your young adult need any special accommodations, such as interpreters or translators?

Multi-tiered System of Support

See Chapter 2, Multi-Tiered System of Support, pages 7-15, of [Educational Rights and Responsibilities: Understanding Special Education in Illinois](#) for more information.

1. Did the school use a Multi-tiered System of Support (MTSS) process to provide support to your child? Yes No

1a. If yes, what interventions did they use?

2. Were the interventions research-based? Yes No

3. Do you know how the school determined what intervention(s) to try?
Yes No

3a. If yes, what process did they use?

4. What length of time was used for an intervention to determine progress?

5. How was your child's progress monitored?

6. Did you receive a written intervention plan as part of the MTSS process?
Yes No

7. Were you informed that you could ask (in writing) for a special education evaluation at any point during the MTSS process?
Yes No

7a. If no, were you told that you had to wait until a later time (until data was collected, until a period of time passed, or for other reasons)?
Yes No

REFERRAL

See Chapter 3, Referral and Evaluation, pages 16-24, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Who made the referral (i.e., parent, MTSS team, student's teacher, etc.) to determine if your child might be eligible to receive special education services?

- 1a. Was it made in writing? Yes No

- 1b. When? _____

2. Why was the referral made?

3. Did you attend a meeting about the referral? Yes No

- 3a. What was the date of the meeting? _____

4. Who was at the meeting?

5. Did you provide any reports or information about your child?
Yes No

6. Name of first report:

- 6a. Who wrote the report?

7. Name of second report:

- 7a. Who wrote the report?

8. Did the team discuss your information in the meeting?

9. What were the results of the meeting?

EVALUATION

See Chapter 3, Referral and Evaluation, pages 16-24, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Were you asked to give your written consent for the evaluation?

Yes No

1a. What was the date you were asked?

2. Did you give consent for the school to do the evaluation?

Yes No

2a. What was the date you gave consent?

3. Did you give **written** consent for the school to do the evaluation?

Yes No

3a. What was the date you gave **written** consent (i.e., signed the Parent/Guardian Consent for Initial Evaluation)?

4. Child's age at the time of consent:

5. Did the school explain the tests that they wanted to do?

Yes No

6. List the name of the tests, assessments, or other type of evaluations.

7. Name and purpose of the test:

7a. Who administered the test?

7b. Date of the testing:

7c. Location where the test was done:

8. Name and purpose of the test:

8a. Who administered the test?

8b. Date of the testing:

8c. Location where the test was done:

9. Name and purpose of the test:

9a. Who administered the test?

9b. Date of the testing:

9c. Location where the test was done:

10. Name and purpose of the test:

10a. Who administered the test?

10b. Date of the testing:

10c. Location where the test was done:

11. Were you given a copy of the evaluation report(s) three days before the eligibility meeting?

Yes No

11a. What was the date you were given a copy of the evaluation report(s)?

11b. What was the date of the IEP meeting?

12. Prior to the meeting, did someone from the IEP team explain the report(s) to you?

Yes No

12a. If yes, who did? _____

13. Comments and notes about the evaluation report(s):

SPECIAL EDUCATION ELIGIBILITY MEETING

See Chapter 3: Referral and Evaluation, pages 16-24, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Did you receive a written notice about the eligibility meeting (i.e. Parent/Guardian Notification of Conference form)?

Yes No

1a. What was the date of the notice? _____

1b. How many days before the meeting did you receive the notice? _____

1c. Did you ask to change the date, time, or place?

Yes No

1d. If yes, did the school make a change?

Yes No

2. Did you go to the meeting or participate by telephone or internet conferencing?

Yes No How did you attend? _____

2a. If no, why not?

3. Did the school ask for your ideas, help, or suggestions in another way?

Yes No

3a. If yes, how did that happen?

4. When was the meeting held? _____

5. Where was the meeting held? _____

6. How long did it last? _____

7. Who was at the meeting?

Name	Position

8. Did you need more than one meeting?

Yes No

8a. If yes, when was the follow-up meeting? _____

9. What information and opinions did you share at the meeting?

10. Were you and the school staff able to agree on your child's special education eligibility?

Yes No

10a. If no, what did you disagree with?

11. Did you do anything in response?

Yes No

11a. If yes, what did you do?

12. Were you told that you have a right to an independent evaluation if you were not satisfied with the evaluation done by the school?

Yes No

Results of the Special Education Eligibility Meeting

13. Does your child have a disability?

Yes No

14. What happens next?

14a. When will this take place? _____

15. Do you know what your child's program will look like?

Yes No

16. Educational Environment (EE) Calculation (Ages 6-21)

a. Total Bell to Bell Minutes _____

b. Total Number of Minutes Outside the General Education Setting _____

c. Total Number of Minutes inside the General Education Setting (line #1 minus line #2)

d. Percentage of time inside the General Education Environment (line #3 divided by line #1)

16a. Will your child be educated in a general education class -

more than 80% of the time? _____

somewhere between 40-79% of the time? _____

39% or less of the time? _____

Comments and notes:

INDIVIDUALIZED EDUCATION PROGRAM (IEP) MEETING

See Chapter 6: Individualized Education Programs, pages 35-55, of *Educational Rights and Responsibilities: Understanding Special Education in Illinois* for more information.

1. Did you receive a written notice about the meeting (i.e., Parent/Guardian Notification of Conference form)?

Yes No

1a. If yes, what was the date of the notice? _____

2. How many days before the meeting did you get the notice? _____

3. Did you get any other reminders or notices?

Phone call Visit Reminder note Email

Other _____

4. Did you ask to change the date, time, or place?

Yes No

4a. If yes, did the school make a change?

Yes No

5. Did you go to the meeting or participate by telephone or internet conferencing?

Yes No How did you attend? _____

5a. If no, why not? _____

6. Did the school ask for your ideas, help, or suggestions in another way?

Yes No

6a. How did that happen?

7. Who asked for the meeting? You School

7a. If you, why did you ask for the meeting?

8. When was the meeting held? _____

9. Where was the meeting held? _____

10. How long did it last? _____

11. Who was at the meeting?

Name	Position

12. Was anyone invited who did not attend? Yes No

Name	Position

13. How was the absence addressed?

14. Did anyone attend who was not invited or listed on the notice?

Yes No

Name	Position

15. How was the participation of this person addressed? _____

16. Did your child attend the meeting?

Yes No

16a. Why or why not?

16b. Did your child actively participate in the meeting (talk about his or her preferences, offer suggestions, etc.)?

Yes No

16c. If yes, what information did your child offer?

17. Did you need more than one meeting to complete the IEP?

Yes No

17a. When was the follow-up meeting? _____

18. What information, ideas, and opinions did you share at the meeting?

19. Were your information, ideas, and opinions included in the IEP?

Yes No Some

19a. What was included?

19b. What was *not* included?

20. What changes were made to the IEP?

21. Were you and the school staff able to agree on the IEP?

Yes No Partially

21a. If yes or partially, what part(s) did you agree on?

21b. If partially or no, what part(s) did you disagree about?

21c. If partially or no, what happened next?

22. Did you get a copy of the IEP before you left the meeting?

Yes No

22a. Did you receive a copy after the meeting?

Yes No When? _____

Comments and notes:

POSTSECONDARY TRANSITION

See Chapter 8: Secondary Transition, pages 64-74, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Did your child attend the meeting?

Yes No

1a. Why or why not?

2. Did your child actively participate in the meeting (talk about his or her preferences, offer suggestions, etc.)?

Yes No

2a. If yes, what did your child say?

3. Did the IEP team base the transition goals on your student's strengths, preferences, and interests?

Yes No

4. Was someone from an outside agency who might support your student with his or her postsecondary career present at the transition meeting?

Yes No

5. Did the IEP team discuss the transfer of parental rights at least one year before your student reached the age of 18?

Yes No

6. Did the school provide you and your child with a copy of the Delegation of Rights form during the IEP meeting in the year that your child turned 17?

Yes No

7. Has your child chosen to delegate his or her right to make educational decisions?

Yes No

8. Did your child complete a Delegation of Rights form?
Yes No Date of form _____

9. Does the transition plan include goals for -
Education and/or training? Yes No
Employment? Yes No
Adult living (if needed)? Yes No

10. Did the IEP team discuss what type of diploma your child will work toward?
Yes No

11. Which diploma is your child working toward?
Standard diploma Special diploma or certificate of completion

12. If your child is graduating, did he/she receive a Summary of Performance (SOP)?
Yes No

13. Comments and notes

REEVALUATION

See Chapter 3, Reevaluation, pages 21-24, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Did you receive a notice about the reevaluation?

Yes No

1a. When? _____

2. Was it time for a three-year reevaluation?

Yes No

2a. If no, what is the reason for the reevaluation?

3. Did the school want to do any tests or other evaluations as part of the reevaluation?

Yes No

3a. If no, did you agree with the school's decision not to give new test(s)?

Yes No

3b. If you didn't agree, why not?

4. Did you ask the school to do new tests or other evaluations?

Yes No

5. Did the school agree to do the tests or evaluations?

Yes No

6. Were you asked to give your written consent for any new tests or evaluations?

Yes No

7. Did you give written consent to any new tests or other evaluations?

Yes No

7a. What was the date of your consent? _____

8. Were the tests explained to you?

Yes No

9. List the name of the tests, assessments, or other type of evaluations.

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

10. Were copies of the evaluation reports provided at least three days before the eligibility meeting?

Yes No

11. Did someone explain the reports to you?

Yes No

11a. Who did? _____

11b. Who did not? _____

12. Comments and notes about the evaluation reports:

INDEPENDENT EDUCATIONAL EVALUATION (IEE)

See Chapter 3, Independent Educational Evaluation (IEE), page 23, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Why do you want an independent education evaluation?

2. Did you send a written request to the school asking for an independent educational evaluation?

Yes No

2a. Did you keep a copy in your file?

Yes No

2b. On what date did you get a written response? _____

3. Did the school agree to pay for an IEE?

Yes No

4. What was the reason for the school's decision?

5. Did you keep a copy of the school's letter/response in your file?

Yes No

6. If the school refused to pay for an IEE, what happened next?

7. Was the IEE done?

Yes No

7a. If yes, what was the date? _____

7b. If yes, who paid? _____

7c. If no, why not?

--

8. List the name of the tests, assessments, or other type of evaluations.

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

Name and purpose of the test	
Test administrator	
Date of testing	
Location of test	

9. Were you given a copy of the IEE report(s)?

Yes No

10. Who presented the results of the IEE at the IEP meeting? _____

OTHER MEETINGS (AS NEEDED)

1. Did you receive a written notice (i.e., Parent/Guardian Notification of Conference form) about the meeting?

Yes No

1a. If yes, what was the date of the notice? _____

1b. How many days before the meeting did you receive the notice? _____

2. Did you ask to change the date, time, or place?

Yes No

2a. If yes, did the school make a change?

Yes No

3. Did you go to the meeting or attend via telephone or internet conferencing?

Yes No How did you attend? _____

3a. If no, why not? _____

4. Did the school ask for your ideas, help, or suggestions in another way?

Yes No

4a. If so, how did that happen?

5. Who asked for the meeting?

You School

5a. If you, why did you ask?

6. When was the meeting held? _____

7. Where was the meeting held? _____

8. How long did it last? _____

9. Who was at the meeting?

Name	Position

10. What was the purpose of the meeting?

11. What information, ideas, and opinions did you share at the meeting?

12. What were the results of the meeting?

Decisions:

Reasons for decisions:

13. What happens next?

14. When will it happen? _____

15. Did you receive a written notice (i.e. Parent/Guardian Notification of Conference Recommendations form) explaining the results of the meeting?

Yes No

15a. If yes, what was the date of the notice? _____

Comments and notes:

SCHOOL RECORDS

See Chapter 13, School Records, pages 124-127, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Do you know that you can ask to review your child's school records? The charts below will help you keep track of any records you ask to review.

Record	
Location	
Have you reviewed the record?	
Date of review	

Record	
Location	
Have you reviewed the record?	
Date of review	

Record	
Location	
Have you reviewed the record?	
Date of review	

Record	
Location	
Have you reviewed the record?	
Date of review	

2. Did you ask someone to explain the records to you?

Yes No

2a. If yes, indicate who helped. If yes, indicate who helped.

Name	
Title	
Date	
Record Reviewed	

3. Did you ask for a copy of the records?

Yes No

4. Were you asked to pay for the records?

Yes No

5. Did anyone tell you that you don't have to pay for the records if you could not afford them?

Yes No

6. Did you ask the school to change the records?

Yes No

7. Were you able to add your changes?

Yes No

8. If the school refused to change your child's records, did you add a written note explaining why you disagree with the record?

Yes No

DISPUTE RESOLUTION CHECKLIST

(For each question, add additional sheets if you need to)

See Chapter 11, Conflict Resolution, pages 86-92, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

First Steps

1. Can you describe the problem to your school representatives in a sentence or two?

2. Are there any questions you need to ask (and have answered) that may help to resolve the issue(s)? List them here:

3. What needs to be done to solve the problem? What does the district need to do differently? Do you need to do anything differently?

4. Have you talked this over with anyone at the district? List any discussions you have had below:

When did you have a conversation/meeting?	
With whom did you converse/talk?	
What was discussed?	
What was the outcome of this talk?	

When did you have a conversation/meeting?	
With whom did you converse/talk?	
What was discussed?	
What was the outcome of this talk?	

When did you have a conversation/meeting?	
With whom did you converse/talk?	
What was discussed?	
What was the outcome of this talk?	

When did you have a conversation/meeting?	
With whom did you converse/talk?	
What was discussed?	
What was the outcome of this talk?	

5. Have your discussions with the district worked out a way to solve the problem(s)?

Yes No

5a. If yes, list what next steps need to happen and when those next steps have to be completed.

Make sure to list things you need to do.

What has to be done?	
When does this have to be done by?	

What has to be done?	
When does this have to be done by?	

What has to be done?	
When does this have to be done by?	

What has to be done?	
When does this have to be done by?	

IEP Facilitation

See Chapter 6, Individualized Education Programs, page 50, and Chapter 11, Conflict Resolution, pages 88 and 91-92, of [Educational Rights and Responsibilities: Understanding Special Education in Illinois](#) for more information.

When deciding whether to request a facilitated IEP meeting, consider some of the following questions before initiating your request.

1. Do you think a person who doesn't work for the district might be able to assist the IEP team participate in meaningful discussion regarding services the student may need?
Yes No
2. Do you think a neutral person might be able to help you and the district understand one another as you discuss and develop a mutually agreeable IEP?
Yes No
3. Are you willing to listen and communicate effectively as the trained facilitator ensures that all members of the team have a voice and are heard during the IEP meeting?
Yes No
4. Do you think the district may also be willing to work with an IEP facilitator for the purpose of helping the IEP team complete the IEP document?
Yes No

If the answer to all four questions is yes, you may make a request via the ISBE website at <https://sec.isbe.net/sems/iepfacilitationrequestpublic.aspx> or call the IEP Facilitation Coordinator at 217/782-5589 to arrange for a facilitator to assist with the IEP meeting. Please provide at least 10 to 14 days' notice prior to the date of the IEP meeting. If the answer to any one question is no, then proceed to the next section.

If you're unsure about the answer to any question, treat the question as if you answered "yes" to it.

Mediation

See Chapter 11, Conflict Resolution, pages 93-96, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

When deciding whether to request state-sponsored mediation, consider some of the following questions before initiating your request.

1. Do you think a person who doesn't work for the district might be able to help resolve the problem?
Yes No
2. Would you be willing to sign a written agreement to solve the problem if a solution could be worked out?
Yes No
3. Are you willing to listen to the other party and be flexible about the possible outcomes? In other words, are you prepared to change your position on some things if the end result would be an acceptable solution to you?
Yes No
4. Do you think the district may be willing to work with a person outside the district to help you both reach a solution to the problem(s)?
Yes No

If the answer to all four questions is yes, then contact the ISBE Mediation Coordinator Sherry Colegrove at 217/ 782-5589 or submit via email a completed mediation request form which is located on the ISBE website at <https://www.isbe.net/Documents/34-15-mediation-request.pdf> to arrange for a state-appointed mediator to meet with you and the district. If the answer to any one question is no, then proceed to the next section. If you're unsure about the answer to any question, treat the question as if you answered "yes" to it.

State Complaint or Due Process?

See Chapter 11, Conflict Resolution, pages 96-100, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

If you still haven't achieved a satisfactory solution to the problem(s), you may need to consider taking the next step of filing a formal complaint or hearing request. Please refer to pages 99-100 of *Educational Rights and Responsibilities: Understanding Special Education in Illinois* for a comparison of the two processes.

When deciding whether to file a complaint or a request for a due process hearing, consider some of the following questions before initiating your complaint or hearing request:

1. Has the problem occurred within the last calendar year? (If the problem arose more than one year ago, you may have only one choice: filing for due process.)
2. Are you prepared to appeal the outcome if it's not to your satisfaction? (If your answer is yes, due process may be your best option because it provides for an appeal to a court of law.)
3. Do you have the time (and if necessary, the money) to make a formal presentation of your position in the matter? (If no, the complaint process may be the way to go because it is a less formal way of making your case.)
4. Are you willing to use a legal representative if necessary to argue for your position? (If no, then you may want to consider a complaint because the complaint process doesn't involve arguing your case as you would in a due process hearing.)
5. Are the issues in your case primarily procedural (e.g., "I didn't receive written notice of the IEP meeting," or "My child's evaluation was not completed on time.") or are the issues primarily substantive (e.g., "I don't agree with the IEP team's recommended placement," or "I don't believe the district's evaluation was adequate to identify my child's needs.")? If the issues focus on procedural concerns, then a complaint is likely the best way to proceed. If the issues are primarily substantive, then a request for a due process hearing is the most effective way to go.

Consider your answers to the questions above. If your answers to the questions suggest that a complaint is the way to go, proceed to the next section. If the answers suggest that due process is the preferred course, then proceed to the section on due process, which follows the section on complaints.

State Complaint

See Chapter 11, Conflict Resolution, pages 97-100, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

Date Filed (the mailing date): _____

Name of ISBE Investigator: _____

Contact Number of Investigator: _____

Email of Investigator: _____

Remember to keep copies of all correspondence or note from each contact person.

Contact Person	
Type of Contact Phone call/email/letter	
Date of Contact	
Contacted by Whom/ Whom Did You Contact	
Summary of Contact	
Next Steps	

Contact Person	
Type of Contact Phone call/email/letter	
Date of Contact	
Contacted by Whom/ Whom Did You Contact	
Summary of Contact	
Next Steps	

Contact Person	
Type of Contact Phone call/email/letter	
Date of Contact	
Contacted by Whom/ Whom Did You Contact	
Summary of Contact	
Next Steps	

Contact Person	
Type of Contact Phone call/email/letter	
Date of Contact	
Contacted by Whom/ Whom Did You Contact	
Summary of Contact	
Next Steps	

Contact Person	
Type of Contact Phone call/email/letter	
Date of Contact	
Contacted by Whom/ Whom Did You Contact	
Summary of Contact	
Next Steps	

Contact Person	
Type of Contact Phone call/email/letter	
Date of Contact	
Contacted by Whom/ Whom Did You Contact	
Summary of Contact	
Next Steps	

Due Process Hearing Request – First Steps

See Chapter 11, Conflict Resolution, pages 100-110, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

First it would be helpful to refer to pages 104-107 of *Educational Rights and Responsibilities: Understanding Special Education in Illinois* for completing a due process hearing request. You may also use the ISBE suggested request form at https://www.isbe.net/Documents/dp_parental_19-86a.pdf.

1. Date request sent to the local district:

2. Date local district received your request, if known:

3. Date you received your initial hearing packet from ISBE:

(Remember that you have 5 calendar days from this date to decide if you want to request a substitute hearing officer.)

4. Name of Hearing Officer: _____

5. Contact Number for Hearing Officer:

The following dates can be found in your initial hearing packet from ISBE:

6. Preliminary Pre-hearing Conference Date:

7. Preliminary Hearing Date:

Remember that these dates are subject to change by the hearing officer.

Please make note of any changes to these dates – they are EXTREMELY IMPORTANT!

Process Hearing – Pre-hearing Steps

See Chapter 11, Conflict Resolution, pages 110-111, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Are you and the district going to conduct a resolution session?

Yes No

1a. Remember unless you and the district agree in writing to skip the process or conduct a mediation instead of a resolution session, you **MUST** participate in the resolution session.

If your answer to #1 was yes, when is the resolution session and where?

1b. If yes, when did you contact the hearing officer?

1c. If no, have you contacted the hearing officer to explain that the resolution session will not occur?

Yes No

2. Date and time set for the pre-hearing conference (if different from the preliminary date listed above): _____

3. Location of the pre-hearing conference:

4. Deadline for submission of witness and document lists:

5. Did you complete the witness list?

Yes No

5a. When did you submit the witness list?

6. Did you complete the document list?

Yes No

6a. When did you submit the document list?

Pre-hearing Conference Outcome

See Chapter 11, Conflict Resolution, pages 110-111, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. What is the final scheduled date for the hearing?

2. Where will the hearing take place?

3. Will the hearing be open or closed to the public?

4. What are the issues/questions the hearing officer will address at the hearing?

5. Were any district witnesses excluded from the hearing?

Yes No

5a. If yes, who was excluded?

6. Were any of your witnesses excluded from the hearing?

Yes No

6a. If yes, who was excluded?

7. Were any district documents excluded from the hearing?

Yes No

If yes, which ones? _____

8. Were any of your documents excluded from the hearing?

Yes No

8a. If yes, which ones?

9. Deadline for submission of your final witness list and documents: _____

10. Any other rulings by the hearing officer?

Yes No

10a. If yes, what were they?

11. Did you receive the pre-hearing conference report?

Yes No

12. When did you receive it?

The Hearing - Are You Ready to Go?

See Chapter 11, Conflict Resolution, pages 112-113, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Was the final witness list prepared and submitted to the district and the hearing officer?

Yes No

1a. If yes, when was it submitted? _____

2. Were clean copies of your supporting documents prepared and submitted to the district and the hearing officer?

Yes No

2a. If yes, when were they submitted? _____

3. For witnesses who do not work for the district, have you provided them with the date, time, and place for the hearing and when they should appear?

Yes No

4. If you need subpoenas for some witnesses, have you obtained signed subpoenas from the hearing officer?

Yes No

5. Have you served the subpoenas on those who require them?

Yes No

5a. If yes, how did you serve them and when?

6. Have you reviewed both your documents and the district's documents carefully before the hearing?

Yes No

7. Have you reviewed both your witness list and the district's witness list carefully so you're aware of who may be testifying at the hearing?

Yes No

√ If you have answered "yes" to all the questions above, you should be ready to participate in the hearing.

√ Remember to listen carefully to everything being said at the hearing and to take notes throughout the hearing.

The Hearing Decision

See Chapter 11, Conflict Resolution, pages 113-115, of Educational Rights and Responsibilities: Understanding Special Education in Illinois for more information.

1. Date the hearing ended: _____
2. Date you received the decision: _____
3. Do you need to clarify anything in the hearing officer's decision or order?
Yes No

Remember you must file a written request for clarification of the hearing officer's decision within 5 calendar days after you receive the decision.

4. Did the result of the hearing favor you or the district?

If necessary, note which issues were decided in your favor and which ones were decided in favor of the district. If more than one issue was decided by the hearing officer, note which issues were decided in the district's favor and which was decided by the hearing officer in your favor.

***Remember that you can seek a review of the hearing officer's decision with regard to those issues with which you disagree. Your request for review must be filed in either state or federal court within 120 calendar days of the date of the hearing officer's decision.



Call List



School: _____

Phone: _____

Assorted School/District Staff	Name	Phone	Email
General Education Teacher			
Special Education Teacher			
Related Service Provider (OT, PT, Speech)			
School Psychologist; School Social Worker			
School Nurse			
Principal			

Superintendent			
Case Manager			
Special Education Administrator			
Board of Education Member(s)			

Telephone/Email Log

Person Contacted	Date	Reason for Telephone Call/Email

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