



To: Parent(s) Name
Address
City, State, Zip
Email Address

Special Education Director
Address
City, State, Zip
Email Address

From: Patricia McGinnis
MNSEMS Coordinator
Compliance and Assistance
Minnesota Department of Education

Date: <date>

Re: Confirmation of Mediation Session Details
Mediation Number:

By mutual consent, a mediation session has been scheduled for <student name> at <time> on <date>, in the <building> located at <address>. If you are unfamiliar with this location and need directions, the building's phone number is <number>.

This letter outlines the procedures that will be followed at the mediation session. Please review these procedures, as well as the attached *Agreement to Mediate* form.

1. Please check at the office/front desk for the room location.
2. <Name>, a mediator with the Minnesota Special Education Mediation Service (MNSEMS), has been assigned to conduct the mediation session.
3. Mediation is easier with a limited number of participants at the meeting. At this time, the only participants who will be allowed at the session without prior consent are <participant names>. Other individuals may be available by telephone or on an on-call basis, if desired. **Please ensure that the people you have asked to attend the mediation are aware of the time and date of the conference and given copies of these materials.**
4. Be sure to bring any documents you wish to discuss to the mediation.
5. Tape or video recording is not allowed.
6. Neither the mediator nor the mediator's records or notes will be available for further proceedings such as a due process hearing. Any agreement reached will be provided in writing and copies given to each of you at the conference.
7. **You should be aware that the length of the mediation is unknown. Accordingly, we**

request that you reserve the entire day for the conference.

8. Please note that the mediator is not acting in the capacity of an attorney or advocate for either party during the mediation session. Rather, the mediator is an impartial neutral party. Therefore, if you anticipate needing an attorney's advice before signing an agreement, you have the right to bring an attorney to the mediation conference or to have your attorney review the agreement before you sign.

After your session, we would appreciate hearing about your experience. You will be asked to complete an evaluation to help us improve our service. Your mediator will have further information for you and answer any questions you have related to the evaluation.

I am available by phone at 651-582-8222 or toll free at 866-466-7367 to discuss procedures or schedules. We appreciate your willingness to attempt mediation in this matter. Every effort will be made by the Minnesota Special Education Mediation Service to help develop a mutually satisfactory agreement.

Atch: Agreement to Mediate Form (to be signed at the mediation)
How to Prepare for Mediation

c: <Mediator> (with signed Request for Mediation form)
<Advocate>