2080 Citygate Drive • Columbus, OH 43219

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**Form C: Report of Due Process Hearing**

Center for Support Services

**School-Court Liaisons:**

D. Steven Allen

James Lewis

**STUDENT NAME:**

**GRADE:**

**SCHOOL:**

|  |
| --- |
| **Date:** |
| **Attention:****Date of Appearance/Hearing/Contact:****Court Liaison:** **Date of Report:** |
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|  |
| DISPOSITION:  |
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