



OFFICE OF ADMINISTRATIVE HEARINGS
STATE OF CALIFORNIA
GENERAL JURISDICTION DIVISION

Filing Instructions: File Electronically at TeacherDismissalMotions@dgs.ca.gov or by Fax to (916) 376-6324

For more information visit

www.dgs.ca.gov/oah/home.aspx

Teacher Dismissal Motion Cover Sheet

(Government Code section 11370.5(b))

CASE TITLE:		Current Dates on Calendar (if any): PHC: Hearing:	OAH CASE NO.
<u>FILING PARTY/ ATTORNEY/ REPRESENTATIVE</u> (Name and Address) Telephone: _____ Fax No: _____ Email: _____ Preferred Method of Service: <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> U.S. Mail		<u>RESPONDING PARTY/ ATTORNEY/ REPRESENTATIVE</u> (Name and Address) Telephone: _____ Fax No: _____ Email: _____ Preferred Method of Service: <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> U.S. Mail	
SECTION I: CASE TYPE			
<input type="checkbox"/> Solely Egregious Misconduct <i>(Must provide the timeline info below)</i>		<input type="checkbox"/> Other Than Solely Egregious Misconduct	
Statutory Timelines: Discovery to be completed by: _____ Hearing to be held by: _____			
SECTION II: MOTION TYPE			
<input type="checkbox"/> Amend Pleadings <input type="checkbox"/> Dismissal of Accusation		<input type="checkbox"/> Continuance <input type="checkbox"/> Limit Evidence at Hearing	
		<input type="checkbox"/> Other _____ <input type="checkbox"/> Discovery (Complete SECTION III)	
In addition to the Motion, attached are:			
<input type="checkbox"/> Declaration of good faith attempt at informal resolution <input type="checkbox"/> Copy of current Pleadings and Proposed Amendment (Motion to Amend only) <input type="checkbox"/> Notice of Motion		<input type="checkbox"/> Memorandum of Points and Authorities <input type="checkbox"/> Declaration in Support of Motion <input type="checkbox"/> Proposed Order <input type="checkbox"/> Proof of Service	
SECTION III: DISCOVERY MOTION			
Good Faith Effort Conference was held on: _____			
Included is/are:			
<input type="checkbox"/> Joint Stipulation		<input type="checkbox"/> Declaration re: Failure to File Joint Stipulation	
_____ Printed Name of Person Filing Motion		_____ Date	
_____ Signature of Person Filing Motion			

2349 GATEWAY OAKS DR., SUITE 200
SACRAMENTO, CA 95833
Phone 916-263-0550 FAX 916-376-6349
sacfilings@dgs.ca.gov

1515 CLAY STREET, SUITE 206
OAKLAND, CA 94612
Phone 510-622-2722 FAX 916-376-6323
oakfilings@dgs.ca.gov

320 WEST FOURTH STREET, SUITE 630
LOS ANGELES, CA 90013
Phone 213-576-7200 FAX 916-376-6324
lateacherdismissal@dgs.ca.gov

1350 FRONT STREET, ROOM 3005
SAN DIEGO, CA 92101
Phone 619-525-4475 FAX 916-376-6325
sanfilings@dgs.ca.gov