

## STUDENT/PARENT COMPLAINT LEVEL THREE APPEAL NOTICE

To appeal a LEVEL TWO decision or the lack of a timely response after a LEVEL TWO conference, please fill out this form completely and submit it by hand delivery, fax, or U.S. mail to the Superintendent or designee within **TEN DAYS** as established in board policy FNG(LOCAL). Appeals will be heard in accordance with FNG(LEGAL) and (LOCAL), with any exceptions outlined therein.

PΑ	ARENT NAME:		
ST	UDENT NAME:		
Α[	DDRESS:		
TE	ELEPHONE NUMBER:		
E١	MAIL		
CA	AMPUS:		
1.	IF YOU WILL BE REPRESENTED IN PRESENTING YOUR APPEAL, PLEASE IDENTIFY THE PERSON REPRESENTING YOU.		
	NAME		
	ADDRESS		
	PHONE		
	EMAIL		
2.	WHO HELD THE LEVEL TWO CONFERENCE?		
	DATE OF CONFERENCE:		
	DATE YOU RECEIVED A RESPONSE TO LEVEL TWO CONFERENCE:		
3.	PLEASE EXPLAIN SPECIFICALLY HOW YOU DISAGREE WITH THE LEVEL TWO OUTCOM		



DATE OF FILING

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- 4. DO YOU WANT THE BOARD TO HEAR THIS APPEAL IN OPEN SESSION? YES NO IF SO, THE BOARD WILL CONSIDER YOUR REQUEST; HOWEVER, YOU MAY NOT HAVE A LEGAL RIGHT UNDER THE TEXAS OPEN MEETINGS ACT TO REQUIRE A MEETING IN OPEN SESSION.
- 5. PLEASE ATTACH A COPY OF YOUR ORIGINAL LEVEL ONE COMPLAINT AND ANY DOCUMENTATION SUBMITTED AT LEVEL ONE AND A COPY OF YOUR LEVEL TWO APPEAL NOTICE.

6. ATTACH A COPY OF THE LEVEL TWO RESPONSE BEING APPEALED, IF APPLICABLE.

SIGNATURE OF COMPLAINANT	
SIGNATURE OF COMPLAINANT'S REPRESENTATIVE	

## **COMPLAINANT, PLEASE NOTE:**

A complaint or appeal form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint or appeal.

Please keep a copy of the completed form and any supporting documentation for your records.