



Employee Complaint Form – Level Three Appeal Notice

To appeal a Level Two decision, or the lack of a timely response after a Level Two conference, complete this form in its entirety and submit by hand delivery, fax, or U.S. mail to the Superintendent or designee within the time frame established in Board Policy DGBA (Local). Appeals will be heard in accordance with DGBA (Legal) and (Local).

1. Name _____

2. Address _____

Telephone number (_____) _____

3. Position _____ Campus/Department _____

4. Will you have a representative present at the Level Two hearing? Yes _____ No _____

5. If Yes, identify your representative/agency _____

6. To whom did you present your complaint at Level Two? _____

Date of Level Two Hearing _____ Date response was received _____

7. What remedy are you seeking? _____

8. Attach a copy of your original complaint and any documentation submitted at the Level One Hearing as well as copies of the Level Two appeal and response.

9. Do you want the Board to hear this appeal in open session? _____
Please be aware that the Texas Open Meetings Act may prevent the Board from granting a request for open session.

Employee signature _____

Representative's signature _____

Date of filing _____