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, electronic communication, or U.S. mail to the Superintendent or designee within the time established in FNG(LOCAL). Appeals will be heard in accordance with FNG(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name: ______________________________________________________________

2. Address: _______________________________________________________________________

   Telephone number: ___________________________________________________________________

   E-mail address: ___________________________________________________________________

3. Campus: _______________________________________________________________________

4. If you will be represented in presenting your appeal, please identify the person representing you.

   Name: _______________________________________________________________________

   Address: _______________________________________________________________________

   Telephone number: ___________________________________________________________________

   E-mail address: ___________________________________________________________________

5. Who held the Level Two conference? ___________________________

   Date of conference: _____________________________

   Date you received a response to the Level Two conference: _____________________________

6. Please explain specifically how you disagree with the outcome at Level Two.

   _______________________________________________________________________

   _______________________________________________________________________

7. 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.

8. 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.

9. Attach a copy of the Level Two response being appealed, if applicable.
Student or parent signature: __________________________________________________
Signature of student's or parent's representative: _____________________________
Date of filing: ______________________________

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.