



# Selma City Schools Disposition Appeal Form *Formal Notice*

School Name \_\_\_\_\_  
Student Name \_\_\_\_\_ Grade Level \_\_\_\_\_  
Parent Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Date of Appeal \_\_\_\_\_

Reason for Disposition \_\_\_\_\_

### Statement of Appeal (Reason for Appeal)

### Explain the Policy/Procedure Violated by School Officials

### Rationale Provide by Scholar for Disposition

### Rationale Provided by School Officials for Disposition

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

*It is every intent of the Selma City School district to resolve every disposition appeal in a fair and equitable manner in alignment with the Student-Parent Resource Handbook. A central office administrator will conduct a thorough investigation including the collection of evidence. The school district has 24 to 48 hours, after receiving an appeal notice to confer with the parent and school officials about his/her findings.*

\_\_\_\_\_  
Signature of Central Office Administrator

\_\_\_\_\_  
Appeal Received Date

*Dr. Zickeyous Byrd, Superintendent*