



Willis Independent School District

612 N. Campbell Street • Willis, TX 77378 • 936-856-1200



LEVEL TWO APPEAL NOTICE - Community Complaint Form

To appeal a Level One decision, or the lack of a timely response after a Level One conference, please fill out this form completely and submit it by hand delivery, fax or U.S mail to the Superintendent or designee within the time established in GF (LOCAL). Appeals will be heard in accordance with GF (LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Complainant Name _____

2. Address _____

3. Phone _____ Email _____

4. Campus _____

5. If you will be represented in voicing your complaint, please identify the person representing you.

Name _____

Address _____

Phone _____ Email _____

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

Date of conference _____

Date you received a response to the Level One conference _____

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7. Please explain specifically how you disagree with the outcome at Level One.

8. Attach a copy of your original complaint and any other documentation submitted at Level One.

9. Attach a copy of the Level One response being appealed, if applicable.

Community Member Name (Printed)	Community Member Signature	Date
Representative Name (Printed)	Representative Signature	Date

Date of filing _____