## **Operational Services**

## Exhibit - Response to Application for Fee Waiver, Appeal, and Response to Appeal

Response to Application for Fee Waiver (To parents/guardians)	
Student's Name (please print)	School
$\square$ Request granted $\square$ Request denied for the following reason(s):	
If your request was denied, you may appeal in w form and submitting it to the Superintendent. If yo with the Superintendent or designee to explain v reapply at any time if circumstances change.	ou appeal this decision, you have the right to meet
Building Principal or Office Staff Member	Date
Appeal of the Denial of a Fee Waiver (To be subm	nitted to the Superintendent)
☐ I am exercising my right to appeal the Building Principal's denial of my request to waive the school student fee described above.	
	uld be granted during a telephone conversation or ecide my appeal. (If you check this box, someone you to make arrangements.)
Parent/Guardian (please print)	Telephone Number
Signature	Date
The Superintendent's office will notify you in calendar days of receipt of your appeal.	writing of the results of your appeal within 30
Response to Appeal of the Denial of a Fee Waive	r (To parent(s)/guardian(s))
Appeal received on:(insert date)	
☐ I have reviewed your appeal.	
Request granted Request denied for th	ne following reason(s):
Superintendent	Date
DATE: January 25, 2018 REVIEWED: March 23, 2023 REVISED: March 23, 2023	

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