HAMSHIRE-FANNETT ISD

<u>COMPLAINT – PUBLIC</u> NOTICE OF APPEAL TO THE BOARD: LEVEL THREE

This form must be filled out completely by a student in the district, a parent of a student in the district, or a resident of the district appealing a complaint decision to the Board in accordance with the District's Policy <u>FNG and FNG (LOCAL)</u> or any exceptions outlined therein.

1.	Name:	Name:				
2.	Position/Campus:					
3.	To whom did you last appeal?					
	Date:					
4.	If you will be represented in pursuing your complaint, please identify that individual or organization:					
	Name:					
	Address:	,				
	Telephone:					
5.	Attach a copy of original complaint and all complaint decisions on Levels One and Two.					
	I REQUESTIN ULAR BOARI			ON THE AGENDA FOR TH	E NEXT	
requi		on the a	genda must	eld on the fourth Monday of ea be received by NOON Monday		
Signa Perso	ature on <i>making</i> appea	al	Date	Signature Person <i>receiving</i> appeal	Date	