

EXPULSION APPEAL FORM

This Expulsion Appeal form shall be received by the Santa Barbara County Education Office within thirty (30) calendar days following the date of expulsion. Late filing of this notice forfeits the right to appeal.

Note: If a student is an adult or an emancipated minor, the student may make this appeal themselves as the Appellant. If the student is not an adult nor an emancipated minor, the student's parent or guardian is the Appellant. (See the Expulsion Appeal Guide for additional information).

Student information:

Name: _____

Birthdate: _____ Grade: _____

Address: _____

City: _____ Zip Code: _____

District: _____ School: _____

Date Local Board Voted to Expel: _____
Month / Day / Year

Parent/Guardian:

Name: _____ Phone number: _____

Address (If Different Than Above): _____

City: _____ Zip Code: _____

Attorney or Representative (not required): _____

Address: _____

City: _____ Zip Code: _____

Expulsion hearings are closed to the public unless you specifically otherwise. Leave this blank if you wish the hearing to remain closed.

____ I am requesting an open (public) session.

1. Parent understanding of reason(s) given by the local board for expulsion: *(Attach copy of notice of expulsion, if possible.)*

2. Why should the expulsion be set aside? *(Please use another sheet of paper for additional comments, if necessary. Attach documentation, if any.)*

Note: An expulsion may be appealed only on one or more of the following four grounds: *(With respect to each ground that applies, give a brief statement of the facts in support of such ground.)*

_____ A. Explain how the governing board acted without or in excess of its jurisdiction in expelling the student. *(See Education Code §48900, 48900.2, 48900.3, 48900.4, or 48915.)*

_____ B. Explain how the student was not afforded a fair hearing before the district governing board. *(See Education Code §48918, §48922.)*

_____ C. Explain how there was a prejudicial abuse of discretion by the district governing board in the hearing. *(See Education Code §48900, 48900.2, 48900.3, 48900.4, or 48915, 48918, 48922.)*

_____ D. Explain if there is relevant evidence which, in the exercise of reasonable diligence, could not have been produced or which was improperly excluded at the hearing before the governing board. (See *Education Code §48918, §48922.*)

I hereby certify that I requested that the district superintendent prepare a transcript of the expulsion hearing and supporting documents on _____ (date).

I further certify that I have received and read the Expulsion Appeal Guide and understand there are certain requirements that I must comply with in proceeding with this appeal. I understand that this form must be filed with the Director of Child Welfare and Attendance at the Santa Barbara County Education Office within thirty (30) calendar days from the date the district board voted for expulsion.

I further certify that this information is true and correct to the best of my knowledge.

Signature of Parent/Guardian (or student, if 18 years or older)

Date delivered or mailed to SBCEO

Please complete this form, sign and date, and send by certified mail or deliver with supporting documents to:

Santa Barbara County Education Office
Attn: Elise Simmons, Child Welfare and Attendance
4400 Cathedral Oaks Road
Santa Barbara, CA 93110