

PARMA CITY SCHOOL DISTRICT  
APPEAL FORM

NAME: \_\_\_\_\_ BUILDING \_\_\_\_\_

DATE: \_\_\_\_\_

IT IS THE RESPONSIBILITY OF THE EDUCATOR TO INITIATE EACH LEVEL OF THE APPEALS PROCESS AS APPROPRIATE

**LEVEL ONE:**

Your Individual Professional Development Plan was denied final approval by the LPDC. To initiate the appeals process, provide written clarification and submit to the LPDC by the next regularly scheduled meeting, which will be held on \_\_\_\_\_. You will be notified of the decision within 10 days of that meeting.

Re-submitted date: \_\_\_\_\_ Decision: \_\_\_\_\_

**LEVEL TWO:**

Your Individual Professional Development Plan was denied after review of the level one appeal. To continue the appeals process, please make an appointment for a personal appearance before the LPDC at the next regularly scheduled meeting which will be held on \_\_\_\_\_ at the Board Office. You will be notified of the decision within 10 days of that meeting. Please be prepared with supportive documentation.

Appearance date and time: \_\_\_\_\_

Decision: \_\_\_\_\_ Date: \_\_\_\_\_

**LEVEL THREE:**

Your Individual Professional Development Plan was denied final approval after your personal appearance. To continue the appeals process, you may request that an out-of-district LPDC third party committee review your Individual Professional Development Plan.

Date Submitted to third party appeals committee: \_\_\_\_\_

Decision: \_\_\_\_\_ Date: \_\_\_\_\_

Appeal Committee Chairperson: \_\_\_\_\_

\_\_\_\_\_

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