

Today's Date:

LEVEL THREE APPEAL NOTICE

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

Parent/Guardian Name:	Home Phone:
Address:	Cell Phone:
Email Address:	Work Phone:
Name of Child (children):	Grade(s):
Name of School(s):	School Administrator Contacted:

1. If you will be represented in voicing your appeal, please identify the person representing you:
Name:
Address:
Telephone Number:
2. To whom did you present your complaint at Level Two?
Name:
Date of Conference:
Date you received a response to the Level Two conference?
3. Please explain specifically how you disagree with the outcome at Level Two? Please attach Level Two written response. What remedy are you seeking?
4. Please attach a copy of your original complaint and any documentation submitted at Level One and Level Two.
5. Please attach a copy of the Level Two response being appealed, if applicable.

Student or Parent/Guardian Signature: _____

Signature of the Student's or Parent's/Guardian's Representative: _____

Date of filing: _____