Exhibit C — Level Two Appeal Notice

To appeal a Level One decision, or the lack of a timely response after a Level One conference, please fill out this form completely and submit it by hand delivery, electronic communication, or U.S. mail to the Superintendent or designee within the time established in DGBA(LOCAL). Appeals will be heard in accordance with DGBA(LEGAL) and (LOCAL) or any exceptions outlined therein.

Name: _____

Address: _____

Telephone number: _____

Email address: _____

Campus/Department: _____

If you will be represented in presenting your appeal, please identify the person representing you. If the person representing you will participate by telephone conference call, please check the box below. The District will inform you if the equipment necessary for telephone representation is unavailable.

☐ Representation will be by telephone conference call.

Please note: You must designate a representative who will be participating in person or by telephone with an advance notice of at least three days, or the District may reschedule the conference or hearing to a later date.

Name: _____

Address: _____

Telephone number: _____

Email address: _____

Who held the Level One conference? _____

Date of conference: _____

Date you received a response to the Level One conference: _____

Please explain specifically how you disagree with the outcome at Level One.

_____

_____

Attach a copy of the Level One response being appealed, if applicable.

Employee signature: _____

Signature of employee's representative: _____

Date of filing: _____