EXHIBIT B

Student/Parent/Guardian Grievance Form Level Two

To appeal a Level One decision, or the lack of a timely Level One response, submit this completed form to GrievanceSupport@pisd.edu within the timeline established by Board Policy FNG (LOCAL). Forms may also be submitted to the Plano ISD Legal Services Department, 2700 W. 15th Street, Plano, TX 75075. Appeals will be handled in accordance with Board Policy FNG (LEGAL) and FNG (LOCAL).

SECTION I - Grievant Information

Parent/Guardian: _____

Address: _____

City/State/Zip: _____

Telephone: _____

Email Address: _____

Student Name/ID#: _____

Campus: _____

SECTION II - Level One Appeal Information

Name of Level One Hearing Officer? _____

Date of Level One Hearing: _____

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

Please explain specifically how you disagree with the outcome of the Level One decision (be as specific as possible) or why you believe the time for a Level One response has expired.

Attach a copy of your original grievance and any documentation submitted at Level One. Attach a copy of the Level One response being appealed, if applicable.

Required Attachments

- Original Level One Grievance Form
- Supporting documentation submitted at Level One
- Level One response being appealed (if applicable)

This appeal is generally limited to issues raised in the Level One grievance. The grievant may submit additional information or documentation related to those issues.

SECTION III - Representation

If you will be represented during the grievance process, identify your representative below.

Name: _____

Address: _____

Telephone: _____

Email: _____

SECTION IV - Signatures and Certification

I certify that this appeal concerns issues raised in the Level One grievance and that the information provided is true and accurate to the best of my knowledge.

Grievant Signature: _____

Representative Signature (if applicable): _____

Grievant, please note:

This appeal notice must be filed within twenty district business days of the date of the written Level One response or, if no response was received, within twenty district business days of the Level One response deadline.

FOR DISTRICT USE ONLY:

Date Received: _____

Received By: _____

Method of Filing: _____

Status:

- Accepted for Processing
- Returned for Clarification
- Dismissed as Untimely

Other: _____