



## COMPLAINT FORM- LEVEL TWO

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

PARENT NAME: \_\_\_\_\_  
STUDENT'S NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
TELEPHONE NO: \_\_\_\_\_  
CAMPUS: \_\_\_\_\_  
PRINCIPAL: \_\_\_\_\_

To whom did you present your complaint at Level One? \_\_\_\_\_

***(A Level Two appeal cannot take place without a decision from the campus at Level One)***

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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe the outcome or remedy you seek for this complaint. (Same as presented in Level I form)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please attach a copy of your original complaint and any documentation submitted at Level One.

Please also attach a copy of the Level One response/decision you received.

Parent signature: \_\_\_\_\_

If you will be represented by someone other than yourself, please identify the person representing you.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date of filing: \_\_\_\_\_ Date Received by District: \_\_\_\_\_

Complainant, please note:

Please ensure you have completed this form entirely before submitting. Forms lacking complete information may not be able to be addressed within the timeline constraints. Any additional evidence or information may be attached to this form.

All evidence may be presented no later than the Level One conference. Please keep a copy of this completed form and any supporting documentation for your records.