This form must be filled out completely by parents/students appealing a Level One decision, to the Superintendent or the Superintendent's designee in accordance with the PRIDE Prep Schools Board Policy or any exceptions outlined therein.

Name of person filing complaint:

Name of student for whom appeal is made (if applicable):

Address:

Phone #:

Campus:

Grade Level:

Complaint being made:

Date:

Level Two complaints should be submitted to the Superintendent or the Superintendent’s designee within ten days after receipt of a Level One response or, if no response was received, within ten days of the response deadline at Level One. The Superintendent or designee will hold a conference with the parent/student within ten days after this appeal notice is filed. At the conference, the Superintendent or designee will consider only the issues and documents presented at Level One and identified in this Level Two appeal notice as well as any documents developed in his or her investigation of the complaint. The Superintendent or designee will have ten days following the conference to provide a written response.

1. To whom did you submit your Level One complaint appeal?

2. Date of conference on Level One appeal:

3. Date received a response to the Level One appeal:

4. Please explain how you disagree with the outcome of the Level One appeal:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
5. Additional statements or information provided regarding this appeal:

______________________________________________________________

______________________________________________________________

______________________________________________________________

REQUIRED ATTACHMENTS (Please ensure the following are attached and included when filing with this form):

A copy of the Level One appeal.
A copy of the Level One decision being appealed.

Sign and date below. Please attach any additional written pages or documentation.

"I affirm that the above and attached statements are true to the best of my knowledge."

___________________________________________ date
Signature of person making this appeal

___________________________________________ date
Signature of person receiving this appeal