

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 FNG(LOCAL). Appeals will be heard in accordance with FNG(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name: \_\_\_\_\_

2. Address: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_

3. Campus: \_\_\_\_\_

4. If you will be represented in presenting your appeal, please identify the person representing you.

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

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

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

E-mail address: \_\_\_\_\_

5. Who held the Level One conference? \_\_\_\_\_

Date of conference: \_\_\_\_\_

Date you received a response to the Level One conference: \_\_\_\_\_

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

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

7. Attach a copy of your original Level One complaint and any documentation submitted at Level One.

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

STUDENT RIGHTS AND RESPONSIBILITIES  
STUDENT AND PARENT COMPLAINTS/GRIEVANCES

FNG  
(EXHIBIT)

Student or parent signature: \_\_\_\_\_

Signature of the student's or parent's representative: \_\_\_\_\_

Date of filing: \_\_\_\_\_

*Complainant, please note:*

*A complaint or appeal form that is incomplete in any material way may be dismissed but may be refiled with all the required information if the refiling is within the designated time for filing a complaint or appeal.*

*Please keep a copy of the completed form and any supporting documentation for your records.*

EXHIBIT D

RESPONSE TO LEVEL TWO APPEAL

\_\_\_\_\_ (date)  
\_\_\_\_\_ (name of complainant)  
\_\_\_\_\_ (address of complainant)  
\_\_\_\_\_  
\_\_\_\_\_ (e-mail of complainant)

Dear \_\_\_\_\_:

Having considered the Level Two appeal on \_\_\_\_\_ (date), I have decided on the following response:

**[Note: When preparing the letter, include only one of the following sentences.]**

I am unable to grant your appeal. I will uphold the decision made at Level One by \_\_\_\_\_ (name) and communicated to you in the Level One response.

I wish to grant your appeal and have instructed \_\_\_\_\_ (name) to find a resolution in keeping with the remedy you seek.

Although I am unable to fully grant your appeal, I have instructed \_\_\_\_\_ (name) to take the following actions as a partial remedy to your complaint:

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

\_\_\_\_\_  
Superintendent (or designee)

*Complainant, please note:*

*To appeal this response, you must file a written notice of appeal with the appropriate administrator within the time limits set in FNG(LOCAL). The necessary appeal forms are available at \_\_\_\_\_ during regular business hours.*