## McLean ISD

## LEVEL TWO APPEAL NOTICE - STUDENT/PARENT COMPLAINT

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, fax, or U.S. mail to the Superintendent or designee within the time established in school board policy FNG (Local). Appeals will be heard in accordance with FNG (Legal) and (Local) or any exceptions outlined therein.

Name	Telephone number
Address	
Campus	
If you will be represented in	voicing your appeal, please identify the person representing you.
Name	Telephone number
Address	
	ur complaint at Level One?
Date of conference	a to the Level One conference
	e to the Level One conference
Please explain specifically no	w you disagree with the outcome at Level One.
	<del></del>
Attach a copy of your origina	l complaint and any documentation submitted at Level One.
Attach a copy of the Level Or	ne response being appealed, if applicable.
Student or parent signature	
Student of parent signature	
Signature of student's or par	ent's representative
 Date of filing	