Complaint appeals must be submitted within the timeline and in manner established in the Student Handbook and must be submitted on this form.

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

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

Address:

Email and Phone:

If you are being represented or if a person other than yourself, or a parent/guardian will speak on your behalf, please provide that person’s name, title, address, email, and phone:

*Note: you must provide three-day advance notice if you will have an attorney/advocate present during your appeal conference. Your conference may be delayed or reset to a later time or date if you do not provide this advance notice.*

To whom did you present your complaint at the prior level?

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

Date of decision: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date you received decision: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Describe your disagreement with the prior level decision (attach additional pages if necessary):

*Keep a copy of this completed form and any additional documents and materials.*

Your signature: \_\_\_\_\_\_\_\_\_\_\_Your title (or “self”): \_\_\_

Date signed: \_\_

***Do not write below this line. KIPP use only.***

*Date received by KIPP:*

*Received by, title: \_\_\_\_\_\_*