JIM HOGG COUNTY INDEPENDENT SCHOOL DISTRICT

Exhibit C STUDENT/PARENT COMPLAINT FORM

FNG (LEGAL) & (LOCAL)

Level Two Notice of Appeal to Superintendent

This form must be filled out completely by the student/parent appealing a Level One decision to the Superintendent or designee in accordance with the District's policy FNG (Legal) & (Local) or any exceptions outlined therein. To appeal a Level One decision, please fill out this form completely and submit it by hand delivery, fax, e-mail, 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. Please be advised that you will not be allowed to present any new evidence at the Level Two and Level Three Hearing, unless such evidence is presented at the Level One Hearing. You will have ten (10) minutes to present your grievance, if any, at the Board meeting.

Grievant's information (All information is required) PLEASE PRINT										
Name										
<u>Address</u> <u>City</u>			ity/State	<u>E-mail</u>						
<u>Phone</u>										
			eal, please identif	y the person representing	g you.					
_	gal Counsel presentative	Name/Organization								
Address			City/State							
Phone			<u>E-mail</u>	E-mail						
1.	To whom did you present your complaint at Level One?									
	Date conference was held:									
2.	Date you received the written response to the Level One Conference:									
3.	Why do you disagree with the outcome of the Level One response? Please explain in detail the following: a. Specifically list the remedy or remedies requested, but not granted, at Level One.									

	b.	List the District policy/	policies violated,	misinterpreted, or m	nisapplied:	
4.	Attach	a copy of your original o	complaint and an	y documentation sub	omitted at Level O	ne.
5.	Attach a copy of the Level One response being appealed, if applicable.					
A complainformati believe w One Confadvised	aint form ion if the vill suppor ference. I that you	nant, please note: that is incomplete in any re-filing is within the desi t the complaint; if unavaila Please keep a copy of the co will not be allowed to pre evel One Conference. You w	gnated time for filii ble when you submi ompleted form and a sent any new evide	ng a complaint. Attach t this form they may be p iny supporting document ence at a future appeal	to this form any doo presented not later th ation for your record hearing, unless such	cuments you nan the Level ls. <u>Please be</u>
Grievant's Signature				Date of Filing		_
 Signature	of Grieva	nt's representative		Date		_
Superinte	endent's s	ignature/Designee		Date Received		