

**BURLESON ISD**  
**LEVEL TWO APPEAL NOTICE**

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To appeal a Level One decision, or the lack of 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 FNG (LOCAL). Appeals will be heard in accordance with FNG (LEGAL) and (LOCAL) or any exceptions outlined therein.

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone number** (\_\_\_\_\_) \_\_\_\_\_

**Campus:** \_\_\_\_\_ **E-mail address:** \_\_\_\_\_

If you will be represented in presenting your complaint, please identify the person representing you:

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

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

Telephone number: (\_\_\_\_\_) \_\_\_\_\_

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

To whom did you present your complaint at Level One? \_\_\_\_\_

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

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

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

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

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Student or Parent signature

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Signature of student or parent's representative

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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.***

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