## LEVEL TWO APPEAL NOTICE OF EMPLOYEE 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 Superintendent within the time established by Board Policy DGBA (Legal) and DGBA (Local). All complaints will be heard in accordance with Board Policy DGBA (Legal) and DGBA (Local) or any exceptions outlined therein.

1.	Name
2.	Address
3.	Telephone Number
4.	Email Address
5.	Campus
6.	If you will be represented in voicing your appeal, please identify the person representing you.
	Name
	Address
	Telephone Number
7.	To whom did you present your complaint at Level One?
	Date of Level One Conference:
	Date you received a response to the Level One Conference:
8.	Please explain specifically how you disagree with the outcome at Level One.

9. Attach a copy of your original complaint and any documentation submitted at Level Or	ne
10. Attach a copy of the Level One decision being appealed, if applicable.	
Student or parent signature	
Student of student or parent's representative	
Date of filing	

## Complainant, please note:

An 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 an appeal.

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