



SOCORRO INDEPENDENT SCHOOL DISTRICT

Policy FNG Level I Appeal Notice

To appeal a Level I decision after a Level I conference, to a Level II Hearing, please fill out this form completely and submit it by hand delivery, fax, or U.S. mail to Dr. Carmen Olivas Graham (or assigned designee) in Administrative Services, within the time established in Policy FNG (Local). Appeals will be handled in accordance with FNG (Local & Legal) or any exceptions outline therein.

Name: _____
(Parent/Grievant)

Telephone #: () _____

Address _____
Street

_____ City State Zip Code

Campus/Dept. _____

Student: _____

Please indicate if you will be represented at the next level hearing and identify the person representing you. Socorro ISD will make contact with your representative.

Name: _____

Telephone # () _____

Address _____
Street

_____ City State Zip Code

Date of Level I Conference: _____

Level I Hearing Officer _____

Please explain below specifically how/why you disagree with the Level I grievance outcome:

PLEASE NOTE: Administrative Services will attach a copy of your original complaint along with all the documentation submitted at each level and the specific responses being appealed, as applicable.

Grievant: _____
Signature

Date: _____

Received by: _____
Signature

Socorro ISD does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs, activities or employment. Socorro no discrimina personas en programas, actividades y empleo por motive de raza, color, origen nacional, sexo, impedimentos/incapacidades, o edad.