The forms on the following pages are provided to assist the District in processing complaints from students and parents:

Exhibit A: Student/Parent Complaint Form — Level One — 2 pages
Exhibit B: Response to Level One Complaint — 1 page
Exhibit C: Level Two Appeal Notice — 1 page
Exhibit D: Response to Level Two Appeal — 1 page
Exhibit E: Level Three Appeal Notice — 1 page
Exhibit F: Board’s Response to Level Three Appeal — 1 page
EXHIBIT A

STUDENT/PARENT COMPLAINT FORM — LEVEL ONE

To file a formal complaint, please fill out this form completely and submit it by hand delivery, fax, or U.S. Mail to the appropriate administrator within the time established in FNG(LOCAL). All complaints will be heard in accordance with FNG(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name __Jane Doe__________________________

2. Address _1234 Example Lane Houston, TX 77080__________________________

   Telephone number (___555___)123-1234 _______________________

3. Campus _XYZ Academy__________________________

4. If you will be represented in voicing your complaint, please identify the person representing you.

   Name Write your attorney’s name here, if you’ve hired an attorney.
   Address Write your attorney’s business address here, if you’ve hired an attorney.

   Telephone number (Write) your attorney’s number here.

5. Please describe the decision or circumstances causing your complaint (give specific factual details).

   See attached.

   __________________________________________________________________________

   __________________________________________________________________________

   __________________________________________________________________________

   __________________________________________________________________________

6. What was the date of the decision or circumstances causing your complaint?
   May 1, 2019

7. Please explain how you have been harmed by this decision or circumstance.
   See attached.

   __________________________________________________________________________

   __________________________________________________________________________
8. Please describe any efforts you have made to resolve your complaint informally and the responses to your efforts.

See attached.

With whom did you communicate? ____________________________________________

On what date? ________________________________

9. Please describe the outcome or remedy you seek for this complaint.

Here you should write what you think the school should do now to fix your issue.

____________________________________________

____________________________________________

Student or parent signature ________________________________________________

Signature of student’s or parent’s representative ________________________________

Date of filing ________________________________

Complainant, please note:

A complaint form that is incomplete in any material way may be dismissed, but may be refiled with all the required information if the refile is within the designated time for filing a complaint.

Attach to this form any documents you believe will support the complaint; if unavailable when you submit this form, they may be presented no later than the Level One conference. Please keep a copy of the completed form and any supporting documentation for your records.
5. Explain the issue you’re having with your school or school district. Include any proof you have. For example, if your child is experiencing bullying on social media, include screenshots of the bullying.

7. Explain how your child has been affected. Is your child now seeing a counselor because you noticed a change in him/her/them? Is your child having nightmares? Did your child’s grades change? Has your child been physically affected? Is your child having panic attacks or anxiety issues? Does your child no longer want to attend school? Is your child coming home from school crying? Include an explanation of any way your child has been affected by the issue. This is your chance to make the district see the way the issue has harmed your child.

8. Explain any attempts you’ve made to informally resolve the issue. For example, have you talked to your child’s teachers or administrators? Did you talk to your child’s counselor? Did you call the parents of any other involved children? Make sure to include proof. If you have emails showing that you’ve contacted your child’s school and they have not responded or not been helpful, then include copies of those emails.
RESPONSE TO LEVEL ONE COMPLAINT

________________________________________ (date)

________________________________________ (name of complainant)

________________________________________ (address of complainant)

Dear ________________________________:

Having considered the complaint we discussed in our Level One conference on ________________ (date), I have decided on the following response:

[Note: When preparing the letter, include only one of the following sentences.]

For the following reasons, I am unable to provide the remedy you seek:

________________________________________________________________________

________________________________________________________________________

I will take the following actions to grant the remedy you seek for your complaint:

________________________________________________________________________

________________________________________________________________________

Although I am unable to provide the full remedy you seek for your complaint, I will take the following actions to provide a partial remedy:

________________________________________________________________________

________________________________________________________________________

Complainant, please note:

To appeal this response, you must file a written notice of appeal with the appropriate administrator within the time limits set in FNG(LOCAL). The necessary forms are available at ________________ during regular business hours.

(Signature of principal or other appropriate administrator)
EXHIBIT C

LEVEL TWO APPEAL NOTICE

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, electronic communication, 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.

1. Name ____________________________________________________________

2. Address ___________________________________________________________

             ____________________________
Telephone number (_____)

3. Campus ___________________________________________________________

4. If you will be represented in voicing your appeal, please identify the person representing you.

Name ____________________________________________________________

           __________________________
Address ___________________________________________________________

             __________________________
Telephone number (_____)

5. To whom did you present your complaint at Level One? ____________________

   Date of conference ____________________________

   Date you received a response to the Level One conference ___________________

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

   _____________________________________________________________________

   _____________________________________________________________________

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

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

Student or parent signature ____________________________________________

Signature of the student’s or parent’s representative _______________________

Date of filing ____________________________
EXHIBIT D

RESPONSE TO LEVEL TWO APPEAL

______________________________________________ (date)

______________________________________________ (name of complainant)

______________________________________________ (address of complainant)

Dear ________________________________________:

Having considered the appeal you presented at Level Two on _________________ (date), I have decided on the following response:

[Note: When preparing the letter, include only one of the following sentences.]

I am unable to grant your appeal. I will uphold the decision made at Level One by ______________________ (name) and communicated to you in the Level One response.

I wish to grant your appeal and have instructed ______________________ (name) to find a resolution in keeping with the remedy you seek.

Although I am unable to fully grant your appeal, I have instructed _________________ (name) to take the following actions as a partial remedy to your complaint:

________________________________________________________________________

________________________________________________________________________

Superintendent (or designee)

Complainant, please note:

To appeal this response, you must file a written notice of appeal with the appropriate administrator within the time limits set in FNG(LOCAL). The necessary forms are available at __________________________________________ during regular business hours.
LEVEL THREE APPEAL NOTICE

To appeal a Level Two decision, or the lack of a timely response after a Level Two conference, please fill out this form completely and submit it by hand delivery, electronic communication, 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.

1. Name ____________________________________________________________
2. Address __________________________________________________________
   Telephone number (______)______________________________
3. Campus ___________________________________________________________
4. If you will be represented in voicing your appeal, please identify the person representing you.
   Name ____________________________________________________________
   Address __________________________________________________________
   Telephone number (______)______________________________
5. To whom did you present your appeal at Level Two? ____________________
   Date of conference _________________________________
   Date you received a response to the Level Two conference __________________
6. Please explain specifically how you disagree with the outcome at Level Two.
   ___________________________________________________________________
7. Do you want the Board to hear this appeal in open session? ________________
   If so, the Board will consider your request; however, you may not have a legal right under the Texas Open Meetings Act to require a meeting in open session.
8. Attach a copy of your original complaint and any documentation submitted at Level One and a copy of your Level Two appeal notice.
9. Attach a copy of the Level Two response being appealed, if applicable.
   Student’s or parent's signature __________________________________________
   Signature of student’s or parent’s representative ___________________________
   Date of filing ________________________________

DATE ISSUED: 4/17/2015
EXHIBIT F

BOARD’S RESPONSE TO LEVEL THREE APPEAL

__________________________ (date)

__________________________ (name of complainant)

__________________________ (address of complainant)

Dear ________________________________:

Having heard the presentation of your appeal at Level Three, the Board took the following action at its meeting on _________________ (date):

[Note: When preparing the letter or announcing the decision at the Board meeting, include only one of the following sentences.]

We have denied the appeal and have upheld the decision made by the Superintendent (or designee) at Level Two.

We have granted the appeal and have instructed the Superintendent to find a resolution in keeping with the remedy you seek.

We have partially denied and partially granted the appeal and have instructed the Superintendent as follows:

______________________________________________________________

______________________________________________________________

______________________________________________________________

Sincerely,

_______________________________________

President of the Board of Trustees

_______________________________________ SD

DATE ISSUED: 4/17/2015
LDU 2015.05
FNG(EXHIBIT)-X