

Appeal of Discipline Hearing Decision

Date: _____

To: _____

Student _____

Dear _____:

I am writing to request an appeal to the school board of the hearing officer's decision to issue a LONG TERM SUSPENSION / EXPULSION/EMERGENCY EXPULSION against a child in my care. Attached is a copy of the hearing officer's decision. I expect to hear from the school board within 10 school business days, with respect to how my appeal will be handled. Please call me as soon as possible if you have any questions regarding this notice of appeal.

Please contact me at

Phone: _____

Address: _____

Sincerely,

(Signature)