

Level III Public/Community Member Complaint Grievance Appeal Notice

To file an appeal of a Level II decision in accordance with Board Policy GF (LOCAL), please fill out this form completely and submit via email to Grievance@ems-isd.net, or by hand or standard mail delivery to the Director of Compliance and Policy, 1600 Mustang Rock Road, Fort Worth, TX 76179. All formal complaints/grievances will be heard in accordance with GF (LEGAL and LOCAL).

DA'	ГЕ OF FILING:		
NA.	ME:		
POS	SITION:		_
CA	MPUS/DEPARTMENT:		_
PHO	ONE NUMBER:	EMAIL ADDRESS:	
1.	List the date of Level II Conference	ce Meeting.	
2.	State the Name of the Level II Hea	aring Officer.	
3.	List the date of the Level II written	n response/decision letter.	
4.	Explain specifically why you disag	ree or not satisfied with the outcome of the	e Level II Conference.
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- 5. Do you request the EMS ISD Board of Education hear your appeal in Open Session? Yes or No If yes, 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.
- 6. Attach a copy of the following:
 - a. The Level I Complaint/Grievance and submitted documentation
 - b. The Level I Response/Decision
 - c. The Level II Complaint/Grievance and submitted documentation
 - d. The Level III Response/Decision

Signature			