

Parent or Student Appeal Form

Date: ____/____/____

Name of Person Filing Appeal: _____

School of Assignment: _____

Which of the following do you feel has been violated or misapplied?

- RCS Board Policy
- N.C. Statute
- None of these, I am appealing a decision not controlled by policy, law or regulation.
- RCS Administrative Regulation
- DPI Regulation

What specific policy, statute or regulation do you feel has been violated or misapplied?

Who do you feel has violated or misapplied the policy, statute, regulation or made an improper decision?

Name: _____

Position: _____

What specific action was taken that you feel violated or misapplied the policy, statute or regulation? (Use attachment if desired)

Date / Time of alleged violation, misapplication or decision

____/____/____

What efforts were made to resolve this issue informally?

What specific relief are you seeking?

Date Submitted: ____/____/____

Signature of Person Appealing: