The forms on the following pages are provided to assist the District in processing complaints from members of the public:

Exhibit A: Public 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

PUBLIC 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 GF(LOCAL). All complaints will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name _____

2. Address _____

   _____

   Telephone number (___)_____

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

   Name _____

   Address _____

   _____

   Telephone number (___)_____

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

   _____

   _____

   _____

   _____

   _____

5. What was the date of the decision or circumstances causing your complaint?

   _____

6. Please explain how you have been harmed by this decision or circumstance.

   _____

   _____

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

_____

_____

_____

With whom did you communicate? _____

On what date? _____

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

_____

_____

_____

_____

Signature of complainant _____

Signature of complainant'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 refiling 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.

EXHIBIT B

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:

_____

_____

_____
(signature of appropriate administrator)

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 GF(LOCAL). The necessary forms are available at _____ *during regular business hours.*

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, fax, or U.S. mail to the Superintendent or designee within the time established in GF(LOCAL). Appeals will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name _____

2. Address _____

   _____

   Telephone number (___)_____

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

   Name _____

   Address _____

   _____

   Telephone number (___)_____

4. To whom did you present your complaint at Level One? _____

   Date of conference _____

   Date you received a response to the Level One conference _____

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

   _____

   _____

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

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

Signature of complainant _____

Signature of complainant'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 GF(LOCAL). The necessary forms are available at _____ *during regular business hours.*

EXHIBIT E

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, fax, or U.S. mail to the Superintendent or designee within the time established in GF(LOCAL). Appeals will be heard in accordance with GF(LEGAL) and (LOCAL) or any exceptions outlined therein.

1. Name _____

2. Address _____

   _____

   Telephone number (___)_____

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

   Name _____

   Address _____

   _____

   Telephone number (___)_____

4. To whom did you present your appeal at Level Two? _____

   Date of conference _____

   Date you received a response to the Level Two conference _____

5. Please explain specifically how you disagree with the outcome at Level Two.

   _____

   _____

6. Do you want the Board to hear this appeal in open session? _____
   Please be aware that the Texas Open Meetings Act may prevent the Board from granting a request for open session.

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

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

Signature of complainant _____

Signature of complainant's representative _____

Date of filing _____

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