

**Eanes Independent School District  
Student and Parent Complaints**

NOTICE OF COMPLAINT AT LEVEL ONE

This form must be filled out completely by a student or parent filing a Level One complaint in accordance with FNG (LOCAL). Use additional pages if necessary and attach any documents you would like considered.

1. Student name \_\_\_\_\_

2. Campus \_\_\_\_\_

3. Address \_\_\_\_\_

4. Home telephone \_\_\_\_\_

5. To whom did you last present your complaint? \_\_\_\_\_

Date of informal conference, if any \_\_\_\_\_

6. If you will be represented by a parent or other adult in pursuing your complaint, please identify the person representing you.

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone number \_\_\_\_\_

7. Please state the date of the event or series of events causing your complaint. \_\_\_\_\_

\_\_\_\_\_

8. Please state your complaint, including the individual harm alleged. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Please state specific facts that support your complaint (list in detail). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. Please state the remedy you seek for this complaint. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student or Parent Signature

\_\_\_\_\_  
Date Submitted

**Eanes Independent School District  
Student and Parent Complaints**

NOTICE OF APPEAL TO THE SUPERINTENDENT AT LEVEL TWO

This form must be filled out completely by a student or parent appealing a Level One decision to the Superintendent or designee, in accordance with FNG (LOCAL). Use additional pages if necessary and attach any documents you would like considered.

1. Name \_\_\_\_\_

2. Campus \_\_\_\_\_

3. Address \_\_\_\_\_

4. Home telephone \_\_\_\_\_

5. To whom did you present this complaint at Level One? \_\_\_\_\_

Date of Level One conference \_\_\_\_\_

Date of receipt of Level One response? \_\_\_\_\_

6. If you will be represented by a parent or other adult in pursuing your complaint, please identify the person representing you.

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

7. Please state the reason(s) this complaint is being appealed to Level II? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student or Parent Signature

\_\_\_\_\_  
Date Submitted

**Eanes Independent School District  
Student and Parent Complaints**

NOTICE OF APPEAL TO THE BOARD AT LEVEL THREE

This form must be filled out completely by a student or parent appealing a Level Two decision to the Board, in accordance with FNG (LOCAL). Use additional pages if necessary and attach any documents you would like considered.

1. Name \_\_\_\_\_

2. Campus \_\_\_\_\_

3. Address \_\_\_\_\_

4. Home telephone \_\_\_\_\_

5. To whom did you present this complaint at Level Two? \_\_\_\_\_

Date of Level Two conference \_\_\_\_\_

Date of receipt of Level Two response \_\_\_\_\_

6. If you will be represented by a parent or other adult in pursuing your complaint, please identify the person representing you.

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

7. Please state the reason(s) this complaint is being appealed to Level III. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Student or Parent Signature

\_\_\_\_\_  
Date Submitted