PAMPA INDEPENDENT SCHOOL DISTRICT
STUDENT, PARENT, OR CITIZEN COMPLAINT
NOTICE OF COMPLAINT: LEVEL TWO

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 US mail to the superintendent or designee within the time established in accordance with the District’s policies FNG and GF, or any exceptions outlined therein.

1. Complainant’s Name: __________________________________________

2. Address: ____________________________________________________ Phone: __________________

3. To whom did you present your appeal at Level One? ______________

4. Date of conference: ____________________________

If you will be represented in pursuing your complaint, please identify the individual or organization representing you:

Name: __________________________________________________________

Address: _________________________________________________________

Telephone: _______________________________________________________

5. State the date of the event or series of events causing the complaint:
   __________________________________________________________________
   __________________________________________________________________

6. Please state your complaint including the individual harm alleged and the remedy sought:
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

7. Please state specific facts of which you are aware to support your complaint (list in detail).
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

Student, Parent, or Citizen Signature

___________________________________________

Signature of Student, Parent, or Citizen Representative

___________________________________________

Date of filing