

Name of Person Appealing:	School:
Complainant: Respondent	Date:
Complainant's Name:	Grade:
Respondent(s) Name:	Grade:
Please briefly describe the incident(s) including date/time	/location:
Reason for Appeal:	
Procedural Irregularity	
Newly Discovered Evidence	
☐ Investigator Had a Conflict of Interest	
Notes:	
I understand that I have the right to appeal the decision m and complete investigation.	ade as a result of a formal Title IX complaint
The District Appellate officer will review all details of the provided with a decision and/or informal resolution.	e case and investigation details. I will then be
Student Signature:	Date:
D G.	D .
Parent Signature:	Date:
Appeal Received By:	Date:

Form No.: STU-021-011 – Formal Appeal of Title IX Decision New Date: 10/22/20

Appellate Officer Review and Results:		
Prior decision regarding findings of responsibility is up		
Prior decision regarding findings of responsibility is no	not upheld	
Explanation:		
Next Steps:		
N		
Notes:		
Appellate Officer:		
Signature:	Date:	
Title:		

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