

**CITIZENS APPEAL FORM**  
**\* LEVEL I**  
**(Principal/School Administrator)**

**MONROE COUNTY SCHOOLS**

\* This form is to be completed only after an informal conference with the principal or administrator in charge as specified in Monroe County Policy KL-1. The appeal procedure approved by the West Virginia Board of Education should be reviewed prior to submitting a formal appeal. Copies are available at the Office of the State Superintendent of Schools, the office of the county board of education and at each public school.

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**CITIZEN(S) MAKING APPEAL**

Name	Address	Phone
Name	Address	Phone

**(Note:** If more than two citizens are filing the appeal, the names, addresses and signatures are to be given on the reverse side of this form.)

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**INFORMATION REGARDING APPEAL**

Policy KL-1 states, "An 'appeal' is a claim by one or more citizens of a violation of state law or the policies, rules and regulations of the West Virginia Board of Education." **Please identify the *specific* state law or the policy, rule or regulation of the State Board of Education claimed to have been violated:**

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In the space provided below, briefly describe the problem or concern, how it affects you, and how you think it should be corrected. (Additional information may be attached.)

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Date

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Signature(s)

**Additional Aggrieved Citizens**

1.	_____	_____
	Name	Phone
	_____	_____
	Address	Signature
2.	_____	_____
	Name	Phone
	_____	_____
	Address	Signature
3.	_____	_____
	Name	Phone
	_____	_____
	Address	Signature
4.	_____	_____
	Name	Phone
	_____	_____
	Address	Signature
5.	_____	_____
	Name	Phone
	_____	_____
	Address	Signature
6.	_____	_____
	Name	Phone
	_____	_____
	Address	Signature

**CITIZENS APPEAL FORM**  
**\* LEVEL II**  
**(County Superintendent of Schools)**

**MONROE COUNTY SCHOOLS**

\* For a Level II appeal to be considered, it must be presented to the county superintendent within fifteen days after receiving the decision from Level I. While the original claim may not be altered greatly in content or wording, additional supportive information may be provided. Please attach a copy of the Level I decision to this form before forwarding it to the county superintendent.

**CITIZEN(S) MAKING APPEAL**

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone
Name	Address	Phone
Date	Signature(s)	

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**Note:** Upon receipt of this appeal, the county superintendent or his/her designee(s) shall have a conference with the citizen(s) in an attempt to resolve the appeal and a written decision will be rendered as specified in the Monroe County Policy at 126CSR188, 4.2.

**CITIZENS APPEAL FORM**  
**\* LEVEL III**  
**(County Board of Education)**

**MONROE COUNTY SCHOOLS**

\* For a Level III appeal to be considered by the county board of education, it must be presented to the county superintendent within fifteen days after receiving the decision from Level II. While the original claim may not be altered greatly in content or wording, additional supportive information may be provided. Please attach a copy of the decision rendered at Levels I and II to this form before forwarding it to the county superintendent.

**CITIZEN(S) MAKING APPEAL**

\_\_\_\_\_  
Name Address Phone

\_\_\_\_\_  
Name Address Phone

\_\_\_\_\_  
Date Signature(s)

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**REQUEST FOR HEARING**

Citizen(s) are entitled to a hearing before the county board of education if requested at the time the Level III appeal is filed.

I/we do \_\_\_\_\_, do not \_\_\_\_\_ request a hearing before the county board of education.

\_\_\_\_\_  
Date Signature(s)

**CITIZENS APPEAL FORM**  
**\* LEVEL IV**  
**(State Superintendent of Schools)**

**MONROE COUNTY SCHOOLS**

\* If the citizen(s) is/are not satisfied with the decision of the county board of education at Level III, that decision may be appealed to the State Superintendent of Schools, if filed within thirty days. The citizen(s) shall include with this form a statement of basic facts related to the appeal plus copies of the appeal and decisions at all lower levels, available transcripts of hearings, and any other supportive information. A copy of all information provided the State Superintendent shall, at the same time, be transmitted by the citizen(s) to the county superintendent of schools. **NOTE: An appeal cannot be heard at Level IV if a specific violation of the state law or policy, rule or regulation of the State Board of Education has not been identified at Level I 126CSR188, 2.1.**

**CITIZEN(S) MAKING APPEAL**

_____ Name	_____ Address	_____ Phone
_____ Name	_____ Address	_____ Phone

**RESPONDENT**

_____ County Board of Education	_____ County Superintendent
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At the request of either party, a hearing shall be conducted by the State Superintendent or his/her designee hearing officer.

I/we do \_\_\_\_\_, do not \_\_\_\_\_ request a hearing before the State Superintendent or his/her designee hearing officer on this appeal.

I/we do hereby swear that the matters set forth in this appeal are true insofar as is known. I/we certify that a copy of this Level IV appeal and accompanying information has been provided by the county superintendent of schools.

_____ Date	_____ Signature	_____ Date	_____ Signature
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