

Lake County School District 7

Code: IGBB-AR(2)
Revised/Reviewed: 8/12/02; 11/14/11
Orig. Code(s): IGBB-AR

TAG Identification/Placement Appeal

- 1. Written Request: (To be completed by the parent and submitted to the principal.)

As parent/guardian of _____ I hereby submit to the TAG coordinator a formal appeal of the identification/placement made concerning my child and seek further consideration of the district's decisions. The basis of this appeal is as follows:

Multiple horizontal lines for writing the basis of the appeal.

Parent/Guardian Signature

Date

- 2. Informal Appeal Process: (For school district use only)

The district's informal reconsideration process has been completed with the following staff members being involved:

Administrators, Teachers, Counselors, TAG Coordinators, and Other checkboxes.

Informal Process Conclusions:

Multiple horizontal lines for writing informal process conclusions.

TAG Coordinator Signature

Date

3. Formal Appeal Process: (For school district use only.)

“Written Request” Received: ___ / ___ / ___ (Init) ___.

“Receipt Acknowledgment” Sent: ___ / ___ / ___ (Init) ___.

Copies of the request have been given to:

- TAG Coordinator Counselor Teacher(s)

The first step of the district’s formal appeals process has been completed with the following staff members, parents and other significant individuals involved:

- Administrator Teacher Counselor Coordinator Other

The following documentation was considered and is attached to this form for future reference:

Building Principal’s Findings Conclusions:

Building Administrator Signature

Date

Administrative Decision Sent: ___ / ___ / ___ (Init) ___.

Formal Hearing by the District Hearings Officer is necessary and has been set for ___ / ___ / ___ (Init) ___.