



## Employee Complaint Form – Level Three Appeal Notice

To appeal a Level Two decision, or the lack of a timely response after a Level Two conference, complete this form in its entirety and submit by hand delivery, fax, or U.S. mail to the Superintendent or designee within the time frame established in Board Policy DGBA (Local). Appeals will be heard in accordance with DGBA (Legal) and (Local).

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

2. Address \_\_\_\_\_

Telephone number (\_\_\_\_) \_\_\_\_\_

3. Position \_\_\_\_\_ Campus/Department \_\_\_\_\_

4. Will you have a representative present at the Level Two hearing? Yes \_\_\_\_\_ No \_\_\_\_\_

5. If Yes, identify your representative/agency \_\_\_\_\_

6. To whom did you present your complaint at Level Two? \_\_\_\_\_

Date of Level Two Hearing \_\_\_\_\_ Date response was received \_\_\_\_\_

7. What remedy are you seeking? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Attach a copy of your original complaint and any documentation submitted at the Level One Hearing as well as copies of the Level Two appeal and response.

9. Do you want the Board to hear this appeal in open session? \_\_\_\_\_

Please be aware that the Texas Open Meetings Act may prevent the Board from granting a request for open session.

Employee signature \_\_\_\_\_

Representative's signature \_\_\_\_\_

Date of filing \_\_\_\_\_