Operational Services

Exhibit - Response to Application for Fee Waiver, Appeal, and Response to Appeal

Response to Application for Fee Waiver (*To parents/guardians)*

Student's Name *(please print)* | School

☐ **Request granted** ☐ **Request denied for the following reason(s):**

If your request was denied, you may appeal in writing by completing the following portion of this form and submitting it to the Superintendent. If you appeal this decision, you have the right to meet with the Superintendent or designee to explain why the fee waiver should be granted. You may reapply at any time if circumstances change.

Chief School Business Official or Office Staff Member | Date

Appeal of the Denial of a Fee Waiver (*To be submitted to the Superintendent*)

☐ I am exercising my right to appeal the Chief School Business Official's denial of my request to waive the school student fee described above.

☐ I would like to explain why the fee waiver should be granted during a phone/video conference or an in-person meeting with the person who will decide my appeal. *(If you check this box, someone from the Superintendent's office will contact you to make arrangements.)*

Parent/Guardian (*please print*) | Telephone Number

Signature | Date

The Superintendent's office will notify you in writing of the results of your appeal within 30 calendar days of receipt of your appeal.

Response to Appeal of the Denial of a Fee Waiver (*To parent(s)/guardian(s)*)

☐ Appeal received on: _____(*insert date*)_____.

☐ I have reviewed your appeal.

☐ **Request granted** ☐ **Request denied for the following reason(s):**

Superintendent | Date