



Wright Elementary School District
Interdistrict Attendance Appeal Request Form

Dear Parent or Guardian:

The attached form has been prepared to assist in filing your appeal of the denial of an interdistrict permit to the Wright Elementary School District.

The appeal form must be requested, completed, signed and returned within thirty (30) days of the denial of your Request for Interdistrict Attendance Permit.

Complete all sections of the form legibly. The reasons for requesting an interdistrict transfer, the reasons listed on the appeal form should closely approximate those stated on the original request form. If the reasons have changed substantially, you will be requested to submit a new request allowing the district further consideration based upon your new reasons.

Submit your completed appeal form with a copy of your original Request for Interdistrict Attendance Permit, and any supporting documents, you wish the Superintendent and local School Board to consider.

After you have filed your appeal, the Superintendent will contact you to discuss your appeal. If a hearing is necessary, the Superintendent will advise the Board and provide you with information regarding a hearing date and time within thirty (30) days of the appeal request. Please note that if the interdistrict is for the next school year the district is required to respond within fourteen (14) days after the start of the new school year, and you have made the request thirty (30) days or more prior to the start of that school year.

Attached is a copy of Wright Elementary School District Board Policy 5117. If a hearing is requested it will be conducted in open session at a regular board meeting. WESD Board Meetings are held on the 3rd Thursday of the month.

It is the intent of the Board to conduct interdistrict attendance appeal hearings in a fair and sufficiently informal manner to encourage open communication and understanding of the system. The hearing will be conducted in such a manner that no special legal expertise is necessary and that all parties have the opportunity to present their cases fairly and completely.

INTERDISTRICT ATTENDANCE APPEAL FORM
(Please type or print; additional pages may be attached if necessary)

Pupils Name: _____

Birthdate: _____ Grade: _____

School Presently Attending or Attended: _____

How Long?

Parent/Legal Guardian Name: _____

Address: _____

Telephone Number: _____ Work Number: _____

School of Desired Attendance: _____

What is your reason(s) for requesting an interdistrict attendance permit?
(copy of Request for Interdistrict Attendance Permit must be attached)

What is your understanding of the reason your request was denied?
