

State CIF Appeals Office 1256 W. Lathrop Road, #101 Manteca, CA 95336 Ph: 209-471-3270 Fax 209-824-7980

DATE OF SECTION DECISION	
DATE RECEIVED	
DATE REVIEWED	
FEE WAIVED	
DATE RETURNED	
HEARING DATE SET	
HEARING NOTICE	
DOCUMENTS DUE	
FOR STATE APPEALS OFFICE	USE ONLY

## **REQUEST FOR APPEAL OF SECTION DECISION ON TRANSFER ELIGIBILITY**

Please refer to Parent Handbook-II at <u>www.cifstate.org</u> for information regarding the appeal process.

## THIS FORM IS TO BE COMPLETED WITH THE ASSISTANCE OF THE CURRENT SCHOOL ADMINISTRATION.

## NO FAX OR E-MAIL REQUEST FORMS ACCEPTED. REQUEST FORMS MUST BE SUBMITTED ON TIME, NON-REFUNDABLE ADMINISTRATIVE FEE MUST BE SUBMITTED WITH THIS REQUEST FORM.

## 1.0 <u>To Timely Process This Appeal Request All of the Following Information Is Required:</u>

CIF Section:
Non-refundable Administrative fee of \$150 included: [yes] [no] [exempt] Cashiers Check or Money Order Only.
Name of current school site administrator assisting in the completion of this form:

PRINT NAME	TITL	E
SIGNATURE	DATI	E
Name of student on whose behalf appeal is filed		
Name of person(s)/entity filing this appeal (Appellant)		
Address:		
СІТУ		
Telephone:		
Email:		
Student's current school and district:		STRICT
Student's current principal:		
Current principal's email:		
Current school address:	СІТУ	ZIP

Cu	rrent school telephone:	Fax:		
Stu Stu	Ident's previous school and district:	DISTRICT		
	evious principal's email:			
Pre	evious school address:			
			ZIP	
	evious school telephone:			
Lea	ague and/or conference in which student will com League:	-		
Lea	ague and/or conference in which student previous			
	League:			
[]	Procedural violations (e.g., no notice, missed dea Misapplication of facts to bylaw (e.g., not all fac Decision based on inappropriate bylaw (e.g., ano Other, explanation required. Briefly explain the basis of the appeal (attach sep	ts considered, facts misstated, dis	sputed facts, et	tc.)
	e Following Additional Information Is Require A copy of the Section Commissioner's written d		ation.	Initial
2.	All new information, paperwork and documenta this request.	tion to be submitted for consider		n submitted with Initial
3.	Appellant requests a: (MARK ONE BELOW – Single hearing officer OR	- See <u>Parent Handbook-II</u> ) Three-member panel.		Initial
4.	Appellant qualifies for and receives a free or r student lunch card is attached to this appeal appl			oved application or Initial
I de cor	<b>quired Certification</b> eclare under penalty of perjury under the laws of trect; that the supporting documents attached are t enowledge that the Appeals Panel decision is final	rue and correct copies of the orig		