

SECOND APPEAL FORM C

| Step #5: | Grievance Number |
|--|---|
| FROM: | , Grievant |
| TO: | , Affirmative Action Officer |
| DATE: | |
| *The attached Grievance Forms A and B to my complaint. | are hereby submitted for the Board of Education's review pertaining |
| (Signature) | |
| | be used by Affirmative Action Officer ONLY) |
| Step #6: | Grievance Number |
| TO: | , Grievant |
| FROM: | , Affirmative Action Officer |
| DATE: | |
| RESPONSE TO SECOND APPEAL: | |
| | |
| | |
| | |
| (Date Appeal Received) | (Affirmative Action Officer) |