



Haworth Public School

**APPEAL
FORM B**

Step #3: _____ Grievance Number _____

FROM: _____, Grievant

TO: _____, Affirmative Action Officer

DATE: _____

**Grievance Report Form A is hereby attached for APPEAL to the Superintendent.*

(Signature)

(This portion to be used by Affirmative Action Officer ONLY)

Step #4: _____ Grievance Number _____

TO: _____, Grievant

FROM: _____, Affirmative Action Officer

DATE: _____

RESPONSE TO GRIEVANT'S APPEAL:

(Date Appeal Received)

(Affirmative Action Officer)