



Broken Arrow Public Schools ENROLLMENT

Broken Arrow Public Schools Appeal Form

Pursuant to board policy 4400: A parent may appeal the denial of a transfer request to the clerk of the board of education so long as the appeal is made within ten (10) calendar days of the notification of the written denial. If a timely appeal is made, the appeal shall be considered by the District’s board of education at its next regularly scheduled meeting. The appeal shall be considered by the board of education only upon the written submission of the District and the parent. Such written submissions shall state, at the minimum, the following in a statement not exceeding two pages in length: The date of the parent’s transfer request application, the reasons for the denial by the District of the transfer request, the factual reason(s) of the District or parent as to why the transfer request was/was not properly denied; and the criteria set forth in the policy as to propriety of the denial of the transfer request.

PLEASE PRINT LEGIBLY AND COMPLETE ALL FIELDS:

Student Name: _____ DOB: ___/___/___ Student Grade: _____

Parent/Guardian Name: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone: _____ Contact Email: _____

Why do you feel the transfer request for your student was not properly denied? _____
