

**BALDWIN-WHITEHALL SCHOOL DISTRICT
EVALUATION APPEAL FORM
STEP ONE**

Name: _____ Date: _____

Position: _____ School: _____

Statement of Appeal:

Nature of Appeal: _____

Action Requested: _____

Signature of Employee: _____ Date: _____

STEP ONE

Principal's Decision _____ Hearing Date: _____

Accept Professional Employee's Position

Reject Appeal

Explanation: _____

Signature of Principal: _____ Date: _____

PROFESSIONAL EMPLOYEES'S RESPONSE

Accept Decision

Appeal to Assistant Superintendent

Signature of Employee: _____ Date: _____

BALDWIN-WHITEHALL SCHOOL DISTRICT

EVALUATION APPEAL FORM

STEP TWO

Name: _____ Date: _____

Position: _____ School: _____

STEP TWO

Statement of Appeal to Assistant Superintendent:

Nature of Appeal: _____

Action Requested: _____

Signature of Employee: _____ Date: _____

Assistant Superintendent's Decision

Hearing Date: _____

Accept Professional Employee's Position

Reject Appeal

Explanation: _____

Signature of Assistant Superintendent: _____ Date: _____

PROFESSIONAL EMPLOYEES'S RESPONSE

Accept Decision

Appeal to Superintendent

Signature of Employee: _____ Date: _____

BALDWIN-WHITEHALL SCHOOL DISTRICT

EVALUATION APPEAL FORM

STEP THREE

Name: _____ Date: _____

Position: _____ School: _____

STEP THREE

Statement of Appeal to Superintendent:

Nature of Appeal: _____

Action Requested: _____

Signature of Employee: _____ Date: _____

Superintendent's Decision

Hearing Date: _____

Accept Professional Employee's Position

Reject Appeal

Explanation: _____

Signature of Superintendent: _____ Date: _____