

MESA UNIFIED SCHOOL DISTRICT

APPEAL OF LETTER OF REPRIMAND - PROFESSIONAL STAFF

FROM: _____

Building File District File

I appeal to the Associate Superintendent the letter of reprimand issued on _____

and the suspension with pay or the suspension without pay

by my unit administrator or the assistant superintendent of my division.

I disagree with the following part(s) of the administrator's decision:

I believe the administrator's decision is incorrect for the following reasons: _____

Additional Pages Attached: Yes No

I request a pre-conference meeting and suggest the following date and time:

_____ _____
Date Time

I request an appeal conference and suggest the following date and time:

_____ _____
Date Time

An association representative will or will not represent me.

Signature

School/Department

Telephone Number

Date