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Burnaby School District staff make many decisions in the course of their duties. These decisions, which are expected to be made in alignment with the principles of fairness, can affect the education, health, or safety of a student. Either making a decision or failing to make a decision may affect a student.

The *School Act* requires that the Board of Education processes awareness of the concerns of equal satisfaction. Those steps on has not been achieved.

1. Decisions that significantly affect the education, health or safety of a student include but are not limited to:
  - a. Suspension or exclusion from school or from a component of a school program for more than 5 days;
  - b. Denial of access to a school or District program or service other than access to a specific course, class or school placement request.
2. When a student and/or pare

3. When a Trustee is alerting a concerned parent or guardian, who has written to an individual Trustee or the Board, that their message has been forwarded to the Superintendent, the Trustee will refrain from responding to the parent or guardian about the substance of the concern in order to protect the process and ensure that if there is an appeal to the Board, it can be heard without prejudice.
4. If the matter is not resolved directly with the District employee, the matter may then be discussed with the school principal.
5. If the matter has not been resolved at the school level, the process will continue with a member of the District administrative staff.
6. If school and District staff processes fail to resolve the complaint, the complainant must request in writing to the Superintendent that the Board hear an appeal. The details pertinent to the appeal must accompany the request. An appeal request should be made as soon as practicable, following the outcome of the process described in Step 5.
7. Unless there are extraordinary circumstances that require a significant delay in filing an appeal, the appeal should be received within 30 calendar days of the conclusion of resolution attempts.

1. Date submitted: \_\_\_\_\_

2. Name and address of the person making the appeal:

NAME:

8. Please identify the grounds for the appeal and the action requested or relief sought:

Grounds / Action:

9. Please provide a summary of the steps taken by the student and or parent/guardian to resolve the matter:

Steps Taken:

10. Are you requesting an in-person hearing?

Yes

No

11. Please note if the person making an appeal requires any special accommodation in order to proceed with the appeal (such as interpretation services at the hearing of the appeal):

Accommodations: