

## EXPULSION APPEAL AND REQUEST FOR HEARING

*Must be filed within thirty (30) calendar days of the district's Governing Board's decision to expel.*

DATE:

TO: TUOLUMNE COUNTY BOARD OF EDUCATION  
175 Fairview Lane  
Sonora, CA 95370

Attn: County Superintendent

For Office Use Only  
Date Received:

Received By:

In accordance with California Education Code Sections 48919 – 48924 and the Tuolumne County Board of Education Policy 5144.5, an Expulsion Appeal hearing is hereby requested.

*(Please print or type, and use additional pages if necessary.)*

Pupil's name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/legal guardian: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Address: \_\_\_\_\_

Phone(s): \_\_\_\_\_

School district: \_\_\_\_\_ Date Governing Board voted to expel: \_\_\_\_\_

What is your understanding of the reason your child was expelled?

Why are you appealing the expulsion?



**Why should the County Board reverse the decision to expel?**

The County Board’s review of the district’s Governing Board’s decision is limited to the following bases for appeal (See “What will the Board consider?” in the Expulsion Appeal Handbook for more information). *Check all that apply, and provide an explanation for each one checked:*

\_\_\_\_ 1. The Governing Board proceeded without or in excess of its jurisdiction in expelling the pupil. *If applicable, state why you believe this is true.*

\_\_\_\_ 2. The pupil was not afforded a fair hearing before the district’s Governing Board. *If applicable, state why you believe this is true.*

\_\_\_\_ 3. There was a prejudicial abuse of discretion in the hearing by the district’s Governing Board. *If applicable, state why you believe this is true.*

\_\_\_\_ 4. There is relevant and material evidence which, in the exercise of reasonable diligence, could not have been produced or which was improperly excluded at the hearing before the district’s Governing Board. *If applicable, explain the circumstances and describe the nature of the new or improperly excluded evidence.*

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**Expulsion hearings are closed to the public unless you request a session open to the pupil.**

\_\_\_\_ I am requesting an open (public) session.

I hereby certify that I requested that the district provide a copy of the transcript of the expulsion hearing and supporting documents on the following date: \_\_\_\_\_.

I further certify that I have received and read the Expulsion Appeal Handbook and understand there are certain requirements with which I must comply in proceeding with this appeal.

I further certify that this information is true and correct to the best of my knowledge.

\_\_\_\_\_  
(Signature of Parent/Legal Guardian (or pupil, if 18 years or older)

\_\_\_\_\_  
(Date)