

Complaint Officer  
WI Dept. of Public Instruction  
P.O. Box 7841  
Madison, WI 53707-7841

To whom it may concern:

This is a formal letter of appeal of my complaint of discrimination by \_\_\_\_\_ School District prohibited under s.118.16, Wis. Stats, and PI 9, Wis Admin. Code, based on \_\_\_\_\_ (*protected class*).

The facts of the case are (*summarize the situation and why you think it is discrimination*).

I'm including the following documents which support this appeal: (*List all copies that you are including. This should have the documentation of all steps you took at the informal school level and the school's personnel's response to those steps, and all written materials from the formal school level.*)

This is what I would like to happen as a result of this appeal. (*Explain what relief you are seeking.*)

You can reach me at \_\_\_\_\_ (*give address, phone and/or e-mail contact information and best times to reach you*) if you have any further question pertaining to this matter.

Sincerely,

(*Your name and parent or guardian's name if a minor.*)