



**Toppenish School District  
Highly Capable Program**

**Screening decisions, and/or program placement decisions, as allowed under statute, are not subject to appeal.**

**Date:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_ **Current Grade Level:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

**Current School:** \_\_\_\_\_

**Reason for Appeal (one or more must be checked to be considered for Appeal):**

- A condition or circumstance believed to have caused a misinterpretation of the testing results, (for example, an incorrect birthdate or grade level used in calculation of the student's score).
- An extraordinary circumstance occurred **during the testing period** that may negatively affect the validity of the test results (such as a death in the family or extreme physical ailment); this must be communicated to the district office in writing **within two weeks of the end of the testing window**.
- The suspicion of an error in the administration of the assessment.
- A misapplication or miscalculation of the scores by the selection committee.

All appeals will go before the Appeal Review Team and you will be notified of the decision by mail. The purpose of the Appeal Review Team is to consider individual circumstances based on one of the criteria above, that may have impacted your child's evaluation data. It is the goal of the Toppenish School District to provide all of our students with appropriate academic services.

**Explain (Attach additional information as needed. Please note: NO PRIVATE TESTING will be considered):**

**Parent Signature:** \_\_\_\_\_

***The deadline for submission of appeals is (10) ten work days from the date of notification of score results.***

<p><b>Mail or hand-carry to:</b> Highly Capable Program Toppenish School District 306 Bolin Drive Toppenish, WA 98948</p> <p>Or Return to your student's school</p>	<p><b>Date Received (Office Use Only):</b></p>
<p><b>Appeal Review Team Decision:</b></p> <p><input type="checkbox"/> Appeal Granted</p> <p><input type="checkbox"/> Appeal Denied</p> <p><b>Date of Decision:</b></p>	<p><b>Comments:</b></p>

***Decision of Appeal Review Team is final***