RECLASSIFICATION AND REALIGNMENT 2018-19 & 2019-20 -- APPEAL FORM

School:	ISD:		
Superintendent:	Phone:	Email:	
Principal:	Phone:	Email:	
Current assignment:	District to which you	want to be assigned:	
Schools must first try and obtain approval	by unanimous vote before appear	ling to the District Assignment Appeals Committee	
1st Level: CHANGE BY VOTE			
Release of Old District:	Acceptance of	Acceptance of New District:	
District # of Yes Votes # of N (Must be Unanimous)	No Votes District #	# of Yes Votes # of No Votes (Must be Unanimous)	
it to alignments@uiltexas.org. Once these so that the approval has been received and the obtained, proceed to the second level.	uesting school must also submit teps have been completed, UIL v change has been made to the dist	tust notify the UIL of the DEC approval by this completed form to the UIL office by emailing will notify the appealing school and both districts trict assignments. If unanimous vote is NOT	
2nd Level: CHANGE BY UIL DISTRICT A	SSIGNMENT APPEALS CON	MITTEE	
The school appealing must inform in writ	level (change by vote) must be ing the superintendent and principal the superintendent and principal	attempted before this appeal can be submitted. acipal of the schools in the conference and of the schools in the conference and district to	
Schools in the UIL assigned district or o moves from the assigned district:	other schools that may be affe	cted if our school is granted an appeal and	
Schools:		Check $()$ those schools receiving written notice of the appeal from your school	
	9	may be affected if our school is granted an	
appeal and moves to the desired district:		Check $()$ those schools receiving	
Schools:		written notice of the appeal from your school	