

Bogert Elementary School

391 West Saddle River Road • Upper Saddle River, NJ • 07458

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Mr. David Kaplan, Principal



Enrichment Program Identification Parental Appeal Form

Child's Name _____

Parent's Name _____

Current teacher _____

Last year's teacher _____

Please comment below as to why you are requesting that your child should be reconsidered for admission into the Bogert School Enrichment Program. The complete appeal process can be found on the 2nd page of this form.

Note: We will only consider information that allows your child to be compared to his/her chronological peers in this school district.

Parent's Signature _____

Date _____

Appeals Process

Please return this form by October 13

1. Parent requests the *Enrichment Program Identification Appeal Form* from the school's Enrichment Specialist.
2. Upon return and receipt of the completed appeals form, the Enrichment Specialist contacts the parent and schedules an appointment within 30 days.
3. The Enrichment Specialist, Guidance Counselor, classroom teacher, and other personnel if necessary, meet with the parent(s) to discuss the criteria and parent's concerns.
4. If agreement is not met, the parent contacts the Building Principal in writing (specifically stating reasons for disagreement) to schedule a meeting.
5. The Building Principal meets with parents and, if necessary, appropriate personnel as soon as possible but within 30 days.
6. If agreement is not reached, parent contacts the Superintendent in writing (specifically stating reasons for disagreement) to schedule a meeting.
7. Superintendent meets with parents and, if necessary, appropriate personnel as soon as possible but within 30 days.
8. The decision of the superintendent is final.

FOR SCHOOL USE ONLY

Date received: _____ Initial meeting scheduled for: _____