

Letter of Appeal

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

To: [School District Board/Appropriate Recipient]

[School District Address]

[City, State, Zip Code]

Subject: Appeal for Reconsideration of School District Boundary Decisions

Dear [Recipient's Name],

I am writing to formally appeal the recent decision regarding the school district boundary changes that were approved on [insert date of decision]. I believe that this decision warrants reconsideration due to the following reasons:

- [Reason 1]
- [Reason 2]
- [Reason 3]

My family and I have been residents of [Your Area] for [number of years], and the recent changes directly affect our access to [specific schools, community resources, etc.]. I respectfully request that the board review the implications of the boundary decisions and consider the impact on families like mine.

I appreciate your attention to this matter and kindly ask for an opportunity to present my case during an upcoming board meeting. Thank you for your consideration.

Sincerely,

[Your Name]