Request for
Advanced Academic Instruction Appeal

Baltimore County Public Schools
Office of Advanced Academics
105 W. Chesapeake Avenue, Towson, MD 21204
(443) 809-4330

This is an appeal of the ___________________________ School Review and Referral Team’s recommendation for my child, ___________________________, Grade ______.

I would like my child to be reconsidered for Advanced Academic instruction in Grade ____ for the following subject(s): ________________________________

I believe my child requires a more challenging learning experience for the following reasons:

____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

(Please attach additional information, if necessary)

I understand that the Coordinator of Advanced Academics will review school records concerning my child and may request that additional information be collected. The Coordinator will provide a written analysis to the Senior Executive Director, Department of Curriculum Operations, who will render a decision within 30 business days.

Signed: ___________________________________________ Date: _____________________
Parent or Guardian

Contact Information: Please Print
Name: ____________________________ Primary Phone: ________ Work Phone: __________
Street: ____________________________ City/State/Zip: _______________________

Mail this form to the Coordinator of Advanced Academics at the above address.
 Appeal requests must be received within 15 school days of the Review and Referral Team’s decision. They must also be received by May 15 to be processed for August placement.