



Every Student Succeeds Act (ESSA)

2019 Accountability Results Appeal Form

Complete this form if you believe the New Jersey Department of Education did not accurately calculate your district's and/or school's accountability determination for **ESSA indicators**. The form must be submitted within 15 calendar days of the date on the notification letter along with the following documentation:

- A detailed explanation of why you believe the determination is not accurately calculated along with a copy of the profile(s) being appealed.
- Documentation to support your appeal. **Coding errors submitted by the district will not be considered.**

Send appeal form and back-up documentation to the Office of Fiscal and Data Services at:
titleone@doe.nj.gov

Submit a separate appeal form and supporting documentation for each school.

Complete the following information:

District Name:

District Code:

County Name:

County Code:

School Name:

School Code:

Contact Name:

Phone Number:

Check all subgroups that apply to your appeal:

Total population/schoolwide subgroup

Students with disabilities

English Language Learners

Economically disadvantaged

White

African-American

Asian/Pacific Islander

Hispanic

American Indian/Native American

Two or more races

Chief School Administrator's Signature: _____ Date: _____