

**STATE OF MICHIGAN  
STATE TENURE COMMISSION**

Docket No.

\_\_\_\_\_  
Appellant  
(print name of teacher on the line)

v

\_\_\_\_\_  
Appellee  
(print name of school district on the line)

CLAIM OF APPEAL

\_\_\_\_\_, the above named Appellant, (by his or her attorney), hereby requests a hearing and appeals the decision of Appellee, and as a basis alleges as follows:

I  
JURISDICTION

(Set forth the basis for the jurisdiction of the tenure commission, such as the date and school district in which the appellant last acquired tenure.)

II  
FACTS

(A claim of appeal must contain a statement of the facts, without repetition, on which the appellant relies in claiming an appeal, with allegations specific enough to reasonably inform the adverse party of the nature of the cause the adverse party is called upon to defend. Each allegation must be made in numbered paragraphs which are clear, concise, and direct.)

III  
ASSIGNMENTS OF ERROR

(State each assignment of error with sufficient specificity to inform reasonably the adverse party of the nature of the claim asserted. Each assignment shall be clear, concise, and direct and stated in a separate numbered paragraph.)

IV  
RELIEF

(Set forth clearly and concisely those demands for relief to which appellant claims entitlement. Relief in the alternative may be demanded.)

V  
ATTACHMENTS

(A copy of the appealed charges or written decision, if any, shall be attached to the claim of appeal.)

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Appealing party or attorney signature

DATED:

print your name  
print your address

print your telephone number

Instructions: File an original and six copies with the State Tenure Commission, 608 W. Allegan St., P.O. Box 30008, Lansing, Michigan 48909