

**MDHS/DYS Oakley Training School  
Due Process Appeal – VII.9.I**

Youth Name: \_\_\_\_\_ Date of Violation: \_\_\_/\_\_\_/\_\_\_

Rule Violation Tracking #: \_\_\_\_\_ Incident #: \_\_\_\_\_

I have been advised of my right to appeal the Due Process Hearing Officer's decision to the Facility Administrator. I hereby wish to appeal:

\_\_\_\_ The decision of my hearing.

\_\_\_\_ The sanction(s) that were imposed.

Date of Violation: \_\_\_/\_\_\_/\_\_\_

Youth signature \_\_\_\_\_

Reason for appeal:

---

---

---

---

---

---

---

Appeal:            \_\_\_\_ Upheld            \_\_\_\_ Reversed            \_\_\_\_ Modified

Explanation:

---

---

---

---

---

---

---

Date: \_\_\_/\_\_\_/\_\_\_

Due Process Hearing Officer \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

Facility Administrator \_\_\_\_\_