



**KEARNEY HIGH SCHOOL  
APPEAL OF CITIZENSHIP FORM  
FOR A+ SCHOOLS STUDENT CERTIFICATION**

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

This request is to appeal the removal of my son/daughter from the A+ Schools' Program because of his/her failure to meet the good citizenship requirement for the following offense:

\_\_\_\_\_

**Why should the student be able to regain their A+ Status?**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

**A+ Advisory Committee Comments:**

\_\_\_\_\_  
A+ Coordinator Signature

\_\_\_\_\_  
High School Principal

Appeal Granted \_\_\_\_\_

Date \_\_\_\_\_

Appeal Denied \_\_\_\_\_

Date \_\_\_\_\_