

REQUEST FOR APPEAL

Every applicant, whether granted relief or not, shall be informed by the General Relief Director, by written decision, of their right to appeal such decision to the Jackson County Board of Supervisors. The applicant shall be informed of: the method by which an appeal may be taken, and that he/she may represent himself/herself, or may be represented by an attorney. The written appeal form must be made to the Director within ten (10) days of the Director's determination. You must provide the applicant's current address and telephone number, and state the reasons for the appeal. The appeal hearing will be placed on the Board's agenda for the next regular Board meeting. The applicant shall be informed immediately by telephone or by ordinary mail of the date and time of the appeal hearing before the Board of Supervisors.

The applicant shall be permitted to present evidence in support of the appeal including testifying, having other witnesses testify, offering documentary evidence and reasonable cross examination of other witnesses, if present. The hearing before the Board of Supervisors will not be an open meeting per the Code of Iowa. The appeal will be recorded. When the Board deliberates on the appeal, no parties shall be present.

If you wish to appeal, complete this form and return it to the General Relief Affairs Office within 10 days of the Jackson County General Relief Office decision.

Full Name: _____

Complete Address: _____

Telephone Number: _____

Reason(s) for the Appeal: _____

Applicant Signature: _____ Date: _____