



Tennessee Department of Education
Individualized Education Account (IEA) Program
Andrew Johnson Tower, 9th Floor
710 James Robertson Parkway • Nashville, TN 37243
Tel: (615) 253-3781 • Fax: (615) 741-6793

Appeal Form for Parent/Student Applicants and Account Holders

The IEA rules allow applicants and account holders to appeal decisions made by the Tennessee Department of Education (the department). The appeal should be submitted to the department on the Appeals Form through the IEA Portal. If the applicant does not have access to the portal, the applicant should download and complete this appeal form and email the completed form to IEA.Questions@tn.gov.

The appeal should be submitted within 10 business days of receipt of the notice of denial, suspension, termination, and/or removal. Notice of denial, suspension, termination, and/or removal shall be provided electronically and via first-class USPS mail and be deemed received three business days after the date of postmark. The appeal shall be reviewed by the commissioner of education, or the commissioner's designee, within 30 calendar days. The commissioner's decision shall be rendered within ten business days of the date of the review.

Directions: Please complete the following fields.

Student Name	
Student's State ID Number	
Applicant/Account Holder Name	
Physical Address (Street, City, and Zip Code)	
Phone Number	
Email Address	
Date	

Type of Appeal: Please mark the box to the right of the best description for the type of appeal you are making in this form.

Application Denial	<input type="checkbox"/>	Required Textbook Affidavit Denial	<input type="checkbox"/>	Tutoring Services Facility Agreement Denial	<input type="checkbox"/>
Expense Report Denial	<input type="checkbox"/>	Postsecondary Textbook Affidavit Denial	<input type="checkbox"/>	Field Trip Pre-Approval Denial	<input type="checkbox"/>
Removal from IEA Program	<input type="checkbox"/>	Computer Hardware Pre-Approval Denial	<input type="checkbox"/>	Tutoring Services Agreement Denial	<input type="checkbox"/>
Curriculum Add Request	<input type="checkbox"/>	Computer Hardware Physician Approval Denial	<input type="checkbox"/>	Norm-Referenced Test Add Request Denial	<input type="checkbox"/>

Other	
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Date of Denial	
What decision are you appealing?	

In the space below, please provide a detailed description of the reason(s) why you are appealing the denial or removal. Please include specific details to substantiate your claims.

Supporting Documentation

If applicable, attach supporting documents to substantiate your claims.

Signature Page

I certify the information provided in this form, including any supporting documentation, is truthful and accurate. I further understand that if any false statements or documentation is provided, the department may prohibit the student and/or account holder from enrolling in the IEA Program and/ or being an account holder in the future, the student's account being frozen, the student being removed from the IEA program, closure of the student's IEA account, and/or forfeiture of all funds remaining in the account. I further understand that if any false statements or documentation is provided, the department may prohibit the student and/or parent/guardian from enrolling in the IEA Program and/or being an IEA account holder in future.

Applicant/Account Holder Signature

Date