Minnesota Department of Education

Division of School Finance
MARSS Data
1500 Highway 36 West
Roseville, MN 55113

APPEAL OF END-OF-YEAR FY 2014 MARSS DATA

ED-02451-06

INSTRUCTIONS: Use this form to compile the information necessary to appeal MARSS data that has been reported by another district or charter school and that data has caused one of the records in your MARSS file to have a fatal error and be excluded from counts. All data items relevant to the specific error must be included. Send the material to marss@state.mn.us or mail to the address above. Also send a copy of all of the materials to the district/charter that you believe has reported erroneously. Refer to "Appeal of MARSS Data Reported by Another District/Charter" for more information.

This form must be dated and received at MDE and Reporting District/Charter by **December 19, 2014.** Response from Reporting District/Charter must be received at MDE by **December 30, 2014.**

Date: _____

DISTRICT/CHARTER CHARGED WITH CAUSING ERROR (REPORTING DISTRICT)

District Name:		District Number:	District Type:	School Number:
MARSS Coordinator:	Telephone Number:	E-Mail Address:		

APPEALING DISTRICT/CHARTER

District Name:		District Number:	District Type:	School Number:
MARSS Coordinator:	Telephone Number:	E-Mail Address:		

Description of Error:

Record in Error:	**Reported:**	**Correction, if known:**
Student Number (13-digits, required to identify record)		
Student Name (required to identify record)		
Status Start Date* (required to identify record)		
Status End Date*		
Status End		
Percent Enrolled		
State Aid Category (SAC)		
Special Education Evaluation Status		
Homebound (HB)*		
*Attendance (only Start/End Date, Percent Enrolled, HB errors)		
*Membership (only Start/End Date, Percent Enrolled, HB errors)		

Attachments:

- ☐ Copy of MARSS 08 Error Report showing fatal cross district error.
- ☐ Two separate documented attempts to contact district/charter school charged with causing error.
- ☐ Responses to each attempt to contact district/charter school.

FOR STATE USE ONLY:

- ☐ Date appeal received (12/19/2014)
- ☐ MARSS 08 Error Report included
- ☐ Data necessary to identify record
- ☐ Charged school's response
- ☐ Data necessary to correct error
- ☐ Two documented attempts
- ☐ Other (specify): _____

Approved – Date: _____ By: _____

Correction made – Date: _____ By: _____

Correction denied due to: ☐ Lack of evidence ☐ Data from accused school ☐ Non-appealable situation