

REQUEST FOR APPEAL – ALLOWABLE COSTS

The purpose of this form is to document the reason(s) for appeal of an Applicant's allowable cost determination. A completed, signed Request for Appeal Form must be submitted within three (3) business days of allowable cost determination as detailed within the Notice of Allowable Costs. Please provide a statement regarding the basis for your appeal. **The statement must clearly identify which future procurement item(s) is being appealed.** Upload the signed Request for Appeal form and all supporting documentation to the Applicant Portal. The upload of this form and the supporting documentation will be considered a complete appeal request.

considered a complete appeal request.		
	School Informatio	n
School Name:		
Site Code:		
School Location		
Street Address:	School Edeation	
Street Address.		
City:	State:	Zip Code:
	Louisiana	
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Request for Appeal		
	determination for	the Louisiana Department of Education ARP EANS
Program.		T
School Authority (Print Name):		Role:
Signature:		Date:
Signature.		Butc.



American Rescue Plan Emergency Assistance to Non-Public Schools (ARP EANS) Program

Please provide an Applicant Statement that identifies, in detail, which future procurement item(s) is being appealed along with a reason(s) for the appeal request. Space for your Applicant Statement is provided on Page 3 of this form. Reminder, please be as detailed as possible in this statement. The Request to Appeal Form is considered incomplete without an Applicant Statement.

Helpful Information:

- Itemized details for each future procurement request can be found in your Notice of Allowable Costs.
- Please see the <u>ARP EANS Frequently Asked Questions</u> for further information on allowable costs and/or program specifics.



American Rescue Plan Emergency Assistance to Non-Public Schools (ARP EANS) Program

applicant Statement