

REQUEST FOR APPEAL – ALLOWABLE COST

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. Please provide a statement regarding the basis for your appeal. **The statement must clearly identify which reimbursement item(s) and/or 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.

School Information

School Name:

Site Code:

School Location

Street Address:

City:

State:
Louisiana

Zip Code:

Request for Appeal

I hereby request appeal of the allowable cost determination for the Louisiana Department of Education EANS Program.

School Authority (Print Name):

Role:

Signature:

Date:

Please provide an Applicant Statement that identifies, in detail, which reimbursement item(s) and/or 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 reimbursement request can be found in the **Excel Reimbursement Detail Document - Final Copy** located in the Attachments section of the EANS Applicant Portal.*
- *Itemized details for each future procurement request can be found in your Notice of Allowable Costs.*
- *Please see the [EANS – Phase 2 Frequently Asked Questions](#) for further information on allowable costs and/or program specifics.*

