

Primary School Appeal Form 2018

Please read the information on page 3/4 of the Guide for Parents before completing this form. If you wish to appeal for more than one school, please photocopy this form to appeal for each individual school or lodge your appeal by emailing appeals@kent.gov.uk naming the individual schools that you wish to appeal for.

Please return this form by Wednesday 16 May 2018.

Name of Pupil:

Date of Birth:

Pupil ID:

Address:

Postcode:

Home telephone:

Mobile telephone:

E-mail address:

Name of school
appealing for:

(Please be aware that Primary Appeals are only upheld in **very** limited circumstances -
For more information please see pages 3 and 4 of the guidance)

Reasons for Appeal:

Please let us know if you intend to send a more detailed letter after you have returned this form

Please continue on a separate sheet if you wish

If you believe that you or your child has a disability that is relevant to your appeal, please tick this box.

Signed (Parent/Carer):

Print name

Mr/Mrs/Ms/Miss:

Date: