



Application for an Appeal Hearing

1. I/We wish to appeal against the refusal of a place atpart of the St John Paul II Multi Academy for my child.

2. My child's personal details are: Name:.....
 Gender:..... Date of Birth:..... Religion:.....
 Address:.....
Postcode:..... Email Address:.....
 Phone Number:..... Mobile Number:.....

3. Present or previous school:.....

4. Current Year Group:.....

5. I wish to appeal against the refusal of a place because (please continue on another page if needed):

.....

.....

I wish the following special factors to be taken into consideration:.....

.....

.....

7. Please indicate if you require any special arrangements eg: Physical, Language, and other. (please delete as appropriate)

.....

8. I shall/shall not attend the Appeals Panel meeting personally and intend/do not intend to be accompanied by a friend to assist in the presentation of my case. (please delete as necessary)

Signed:(Parent/Guardian) Date:.....

