

Written By:

Full Name of Child:

Appeal Form Co-ordinated Admission Scheme Transfer to Secondary Education

This form should only be used to appeal for Norton Hill Academy

This completed form should be returned by the requested date to Clerk to the Appeals Panel c/o Admissions & Transport, Bath & North East Somerset Council, Lewis House, Manvers Street, Bath, BA1 1JG.

As this form will be photocopied please complete it in BLACK ink.

Name of parent/carer

Child's Date of Birth:	
Address of Child:	
	Postcode:
Daytime Telephone Number(s):	
Name of School Appealing for and Preference Number:	Preference No (i.e. 1 st , 2 nd , 3 rd , 4 th or 5th)
Reasons for Preference/Grounds for Appeal	
Reasons for Preference/Gr	ounds for Appeal
Any information you wish to submit in support of your appeal should be sent in by you, if possible, with your letter of appeal. Please indicate if supporting evidence is included with this appeal letter. YES/NO (delete as appropriate)	
	(Please Continue Overleaf if needed)

Reasons for Preference/Grounds for Appeal (continued)	

If attaching additional sheets please tick this box