

Secondary Transfer Admission Appeal Form

Please complete this form if you wish to appeal against PolyMAT's decision not to offer your child a place at a school for which you have applied. It is recommended that you read the 'Admission Appeal Guidance Notes for Parents and Carers' before completing this form.

Section 1: Child's details

Child's family name/surname:

Child's given/first name(s):

Date of Birth: Male/Female:

Address:

..... Tel No:

Child's ability band (please tick)

1A	<input type="checkbox"/>	2B	<input type="checkbox"/>
1B	<input type="checkbox"/>	3	<input type="checkbox"/>
2A	<input type="checkbox"/>		<input type="checkbox"/>

Section 2: Additional information

Have you submitted an appeal form at any time in the past? YES/NO

If yes, please name the school appealed for:

In which year was the appeal heard?

Are there any days on which you cannot attend an appeal hearing? YES/NO

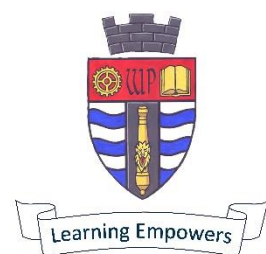
If yes, please give specific dates:

Do you have English as a second language? YES/NO

If yes, please state language spoken:

Do you intend to bring someone with you to act as an interpreter? YES/NO

September 2014



Please turn over and complete the second side of this form

Section 3: Parent's/Carer's statement

I wish to appeal against the decision not to offer my child a place at
School because:

Full name of parent/carers:

Signature of parent/carers: Date:

Your completed appeal form and supporting documentation must be returned to: The Business Manager, Woolwich Polytechnic School, Hutchins Road, SE28 8AT



