

# APPEAL FORM FOR ADMISSION TO



Please note:

\* If you are appealing for more than one child please complete a separate form for each child and each appeal.

\* **Please complete this form in black ink.** (To enable legible photocopying to be produced).

<b>THE WHITBY HIGH SCHOOL</b>							YEAR GROUP FOR WHICH YOU ARE APPEALING	
CHILD DETAILS	Surname:			Forename:				
	Legal Surname:							
	DOB	DAY	MONTH	YEAR	GENDER	(Please circle) M / F	CURRENT YEAR GROUP	
School currently attending / last school attended:								
Date child left (if applicable):								

	Yes √	No √
Is this child a Looked After Child eg. In Foster Care?		
Does your child have an EHCP?		
Has your child been permanently excluded from school?		

Appellant's names: (parents/carer)		
Relationship of appellant to child – (please specify – parent/guardian/carer/other)		
Do you intend to be present at the appeal hearing?		Yes / No (please circle)
Current Address:-		Address to which you are moving:- (if applicable)
POST CODE:	POST CODE:	Date of Moving:
Telephone contact numbers:		
Email address:		

*For office use only*

Date received	
Confirm PAN reached	
Logged on system	
Acknowledgement letter sent	

Child's Catchment School	
Presenting Officer	
Passed to legal	
Processed by	

Do you have any other school-aged children?  
If so, indicate their names, ages and schools they attend.

Name	Date of Birth	Name of Child's present school

Please state your reasons for seeking a place at this school (eg. Moving into area/domestic arrangements etc). If you are stating medical, psychological or social reasons please ensure that professional evidence is attached, e.g . a letter from a doctor stating the medical reasons which require your child to attend this particular school.

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(continue on a separate sheet if necessary)

I wish to appeal against the decision of The Whitby High School not to allocate a place for my child.

Signed ..... Date .....

*Please return this form to:* Admissions Officer  
The Whitby High School Admissions  
Sycamore Drive  
Ellesmere Port  
Cheshire  
CH66 2NU  
  
Tel: 0151 355 8445