## ST DUNSTAN'S, CHEAM, C of E PRIMARY SCHOOL APPEAL FORM

This form must reach the school by the closing date for appeal applications, which is **15**<sup>th</sup> **May 2023 at 4.00pm**. There can be no guarantee that your appeal will be heard if it does not arrive by the closing date.

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SURNAME OF STUDENT:	FIRST NAME:
DATE OF BIRTH:	
CURRENT SCHOOL:	
NAME OF PARENT/	
GUARDIAN:	
ADDRESS:	
	POST CODE
TELEPHONE NOS:	HOME:
	WORK:
	MOBILE:
•	n's, Cheam, C of E Primary School. You may continue on a separate sheet if necessary.

If you are including written evidence to support your appeal, please list here what it is (for example, doctor's letter,			
letter from other educational professional etc).			
Lathern and distance links were the started as the	(		
Is there any additional information that we need to know for the proper conduct of the appeal? For example, do			
you have difficulties with mobility, do you have a visual im	pairment?		
Places tick the following as applicable			
Please tick the following as applicable.			
	— —		
I wish to attend the appeal hearing in person	Yes No No		
I will be bringing another person with me to the appeal	Yes No		
NAME OF COMPANION	RELATIONSHIP TO YOU		
NAME OF COMPANION	RELATIONSHIP TO TOO		
I will be bringing someone to represent me at the appeal	Yes No No		
	<u> </u>		
NAME OF REPRESENTATIVE	******		
Dates I am NOT quailable for an annual basiling			
Dates I am NOT available for an appeal hearing			
Signed:	Print name:		
Date:			

Please return this form and any additional paperwork to:
The Clerk to the Admissions Appeals Panel, c/o St Dunstan's, Cheam, C of E Primary School
Anne Boleyn's Walk, Cheam, Surrey, SM3 8DF
BY THE CLOSING DATE