

APPEAL AGAINST REFUSAL TO ADMIT TO HABERDASHERS' ABRAHAM DARBY



Haberdashers' ABRAHAM DARBY

Confident - Calm - Caring

New Year 7 Intake Appeal Form

Complete in full and return to:- The Clerk to the Appeals Panel, Haberdashers' Abraham Darby, Ironbridge Rd, Madeley, Telford, TF7 5HX. E-mail: abrahamdarby.appeals@taw.org.uk

CHILD'S / CHILDREN'S DETAILS

CHILD 1

Legal Surname

.....

Legal Forename(s)

.....

Date of Birth

Gender

CHILD 2

Legal Surname

.....

Legal Forename(s)

.....

Date of Birth

Gender

FAMILY INFORMATION

Name of Parent(s) state Mr, Mrs, Miss, Ms etc

.....

Child(ren)'s current address the address of the normal residence of the parent who has care of the child(ren)

.....

.....

.....Post Code.....

If you have recently moved or are going to shortly, please give this address

.....

.....

Date of move.....Post Code.....

Home telephone

Mobile telephone

Work telephone

E-mail

SIBLINGS

Name DOB and School/Pre-School attended by any brothers & sisters (aged 0-18)

1.....

.....

2.....

.....

3.....

.....

ADMISSIONS

Schools you have applied for in order of preference

1.....

2.....

3.....

School you have been offered a place at

.....

Have you appealed at another (mark appropriate box) secondary school

Yes

No

If yes where

Date of appeal if known

FURTHER INFORMATION

School your child is currently attending

.....

Does your child have SEN (mark appropriate box)
(Special Educational Needs) requirements ☐ Yes ☐ No

Is your child looked after by the (mark appropriate box)
Local Authority ☐ Yes ☐ No

In the space provided below please state clearly the reasons (in order of priority) for your appeal.
(Continue on a separate piece of paper if necessary and attach any supporting documents
including your child's latest school report)

At a later date the Clerk to the Appeals Panel, will send a notice of the date and time of the Appeal Panel's hearing. At that stage you will be asked whether you wish to attend the hearing, with or without a representative. New Year 7 Intake appeals are held in May.

I have parental responsibility for this child. Declaration (to be signed by Parent/Carer)

I certify to the best of my knowledge the information given is correct.

Signature of Parent/Carer Date

Details given on this form may affect the outcome of your appeal. Details of your child's address are particularly important, and all information may be checked by the LA. Information may also be requested from another education authority, school, college or other place of education for the purposes of verifying your child's previous educational placement. We may withdraw any school place offered if the information you have provided is found to be fraudulent or intentionally misleading.