

fortismere

Please return this form within twenty school days of its receipt to:

Clerk to the Admission Appeal Panel
c/o Admissions Officer, Fortismere School,
South Wing, Tetherdown, London, N10 1NE

APPEAL for Mid Term Admission 2016

I wish to appeal against the decision not to provide education for my child at Fortismere.

Child's name (in BLOCK capitals please):

Surname.....First Name.....

Date of Birth.....Gender Male/Female

Home Address.....

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

Names of Parents/Carers.....Tel No. (Home).....

.....(Work).....

.....(Mobile).....

Email.....

Do you require a translator? Yes/No Language.....

I do not wish to attend in person I wish to attend in person

I will be accompanied by the following representatives, relative or friend: Yes/No

My reasons for appeal are stated overleaf (*please refer to the oversubscription criteria*) and state under which category you are applying)

School listed on the original application form:

1st preference.....

2nd preference.....

3rd preference.....

4th preference.....

School Offered.....

Date Received: (*office use only*)

Please use this space to explain your reasons for appeal. Continue on to a separate sheet if necessary.

The following documents are attached:

Signature of Parent/Guardian.....Date.....