

St John Fisher Catholic High School

Admissions Appeal Form



Please complete and return to: St John Fisher Catholic High School, Park Lane, Peterborough, PE1 5JN

Child's Family Name: _____ Date of Birth: _____ Boy/Girl

Child's First Name: _____ Year Group appealing for: _____

Present School: _____ Date of Leaving: _____

Current Address: _____

New address (if appropriate): _____

If you are moving or have moved house, please provide proof of new address (Tenancy Agreement, household bill)

Is the child **"Cared for"** by the Local Authority (in public care)? Yes/No (delete as appropriate)

If yes, please state which Local authority and provide a contact number: _____

Does your child have a **Statement** of Special Educational Needs? Yes/No (delete as appropriate)

Is your child permanently excluded from school? Yes/No (delete as appropriate)

Your full name: _____ Mr/Mrs/Miss/Ms/Dr (delete as appropriate)

Your relationship to child: _____
(please specify – mother/father/carer/other etc.)

Current Address (if different from child's address) _____

Do you intend to be at the appeal hearing? Yes/No (delete as appropriate)

Do you have any special requirements? Yes/No (delete as appropriate)
(Wheelchair access/hearing problems?)
If yes, please state requirement: _____

Contact telephone number: _____ Email Address: _____

Do you have any other school age children? Yes/No (delete as appropriate)

If yes please complete with their names, ages and schools they attend.

Name	Age	Name of current school

Please continue overleaf

Please state your reasons why you are appealing for a place at St John Fisher Catholic High School.

If you are stating medical, psychological or social reason **PLEASE ENSURE THAT PROFESSIONAL EVIDENCE IS ATTACHED** e.g. a letter from a doctor or professional stating the **medical** or **social reasons** supporting your request for a place at this school.

(continue on a separate sheet if necessary)

I wish to appeal against the decision not to allocate a place for my child at St John Fisher Catholic High School.

Signed: _____ Date: _____

Please return form to: Clerk to the Governors
 St John Fisher Catholic High School
 Park Lane
 Peterborough
 PE1 5JN

Telephone: 01733 343646
 email: admissions@stjohnfisherschool.org.uk

