Pupil ID		
Name of pupil		
Date of birth		
Address		
Telephone contact numbers		
Email address		
Name of school appealing for		
Before completing, p	lease refer to the school FAQ.	
	als Panel intends that your appeal will be conducted under a virtual setting . All paperwork will be issued to you electronically and further instructions will me.	
virtually, and you do no information/evidence th	an equality consideration that prevents you from accessing the hearing of have reasonable support to do so, provide your reasons below and any nat would support your case. There would need to be clear grounds to identify or the appeal to be heard.	
Examples of school work your child may have undertaken <u>will not be accepted</u> as the Panel will not be able to make a proper judgement about its quality. The members would have nothing to measure it against and would not know the depth of the work submitted. Also, they would not know whether the work had been carried out unaided.		
Reasons for Appeal:		
Please continue on a s	separate sheet if you wish	
If you or your child have	ve a disability which you believe is relevant to your appeal, please tick:	
If you wish your appeal to be heard under an alternative format to virtually, please tick:		
If you intend to send a more detailed letter after you have returned this form, please tick:		
Signed (parent)		

Print name (parent) Mr/Mrs/Ms/Miss	
Date	