## Halton LA In-Year Transfer Appeals Form

Academic Year 2014-2015

You have been refused a place for your child at the Halton School named below. You have a right of appeal against this decision. If you decide to appeal, please complete this form and return it to the address shown at the foot of this form.

SCHOOL YOU WISH TO APPEAL FOR:							
VOLUE CLIII DIC DETAIL C							
YOUR CHILD'S DETAILS	F						
Surname:	Forename:						
Date of Birth:	Gender:						
Home Address:	Postcode:						
Current/Previous School:							
REASON FOR APPEALING							
Please give the reasons why you think your sor	n/daughter should be admitted to this school						
	ditional sheets firmly to this form and ensure your childis full name is clearly marked						

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I certify that all the information given above is correct. I am aware that, if I do not attend the appeal hearing, it will be heard in my absence using the information available.

Parent/Carer Name:	Relationship to child:	
Daytime Number:	Evening Number:	
Signed:	Date:	

Please return this form to any of the Halton Direct Link Offices or to:

Child Place Planning Team, Rutland House, Halton Lea, Runcorn, Cheshire, WA7 2GW

If you have any queries, please call us on 0151 5117271/5117338 or email schooladmissions@halton.gov.uk

