## NOTICE OF APPEAL (Secondary Transfer) Hasmonean High School for Girls

To: Clerk to the Admission Appeal Panel c/o Hasmonean High School Admissions Department

## This form should be returned by **Thursday 9<sup>th</sup> May 2024**.

I/We wish to appeal against the decision of the Admissions Committee of the Governing Body not to offer a place to my/our daughter at Hasmonean High School for Girls for September.

Please type or print your details clearly. This information will be forwarded to the Appeals Clerk for purposes of processing your request.

Name of child:		
Student's date of birth:		
Name of Parent(s):		
Address of child:		
Parent(s) daytime telephone number:		
Parent(s) email:		
Current Primary School:		
Allocated Secondary School: (this is the school offered to you by your Local Authority)		
Schools as listed on your Common Application Form:	1.	4.
	2.	5.
	3.	6.
Are you holding a place at a private school or considering any other educational options for your child?	YES / NO (circle one) If 'yes', which one?	
Do you require any special arrangements or assistance to attend an appeal hearing due to a disability or language difficulty? Please specify.		

The Clerk normally holds the appeals via video conference. To assist with preparations, please indicate how you prefer to participate in the panel hearing:

I am happy to participate	I do not wish to attend and prefer		Other	
via video conference	to make a written submission only			

**Grounds of appeal**. Please submit a detailed statement of your reasons for appeal, continuing on a separate sheet if necessary. Please also attach any supporting documents/evidence. This section should be completed even if you intend to speak at the hearing in person. Your statement will be read before the Appeal Panel at the hearing.

Parent/Guardian making the appeal:

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

Date \_\_\_\_\_