Primary School Appeal Form

Pupil ID	
Name of pupil	
Date of birth	
Address	
Telephone contact numbers	
Email address	
Name of school appealing for	
Before completing, please refer to the school FAQ.	
The Independent Appeals Panel intends that your appeal will be conducted under a virtual setting using Microsoft Teams. All paperwork will be issued to you electronically and further instructions will be issued nearer the time.	
If you can demonstrate an equality consideration that prevents you from accessing the hearing virtually, and you do not have reasonable support to do so, provide your reasons below and any information/evidence that would support your case. There would need to be clear grounds to identify an alternative format for the appeal to be heard.	
Reasons for Appeal:	
Please continue on a separate sheet if you wish	
If you or your child have 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	