



**APPEAL AGAINST DECISION OF JFS**

This form should be completed clearly by the parent/guardian and returned by **Wednesday 22<sup>nd</sup> May 2024**.  
Please type, or write in capitals with black ink (to ease reading and photocopying).

<b>FULL NAME OF CHILD:</b>		
<b>ADDRESS:</b>		
<b>TELEPHONE NUMBER:</b>		
<b>DAY:</b>		
<b>EVENING:</b>		
<b>MOBILE:</b>		
<b>E MAIL ADDRESS:</b>		
<b>CURRENT PRIMARY SCHOOL:</b>		
<b>ALLOCATED SCHOOL:</b>		
<b>SCHOOLS AS LISTED ON YOUR COMMON APPLICATION FORM (1-6):</b>	<b>1.</b>	<b>4.</b>
	<b>2.</b>	<b>5.</b>
	<b>3.</b>	<b>6.</b>
<b>The appeal venue will have disabled access but please advise us if you have any specific needs:</b>		
<b>Do you wish to attend the appeal in person? If you do not attend the appeal will be heard based on the written case.</b>	<b>YES/NO</b>	
<b>If English is not your first language you can bring someone with you to assist you. If however you require us to arrange an interpreter or signer please advise us.</b>	<b>I REQUIRE YOU TO ARRANGE AN INTERPRETER AND THE LANGUAGE IS: .....</b>	
<b>NAME OF PARENT/GUARDIAN:</b>		
<b>SIGNATURE OF PARENT/GUARDIAN:</b>		
<b>DATE:</b>		

**PLEASE SUBMIT A DETAILED STATEMENT OF YOUR CASE ON A SEPARATE SHEET OF PAPER. IF YOU SUBMIT ANY DOCUMENTS TO ACCOMPANY YOUR APPEAL YOU MUST PROVIDE SIX COPIES.**

All appeals must be returned to **Mrs J Bransgrove**, Clerk to the JFS Appeal Panel, c/o JFS, The Mall, Kenton, Harrow, HA3 9TE

My reasons for appealing are:

*You must include at least a summary of your grounds of appeal in order for your appeal to be lodged- .*

If necessary, please continue on a separate sheet and attach any supporting documents/evidence.