



# Blackfen School for Girls

Raising aspirations - releasing potential

## APPEAL FORM

### NOTICE OF PARENTAL APPEAL AGAINST A DECISION NOT TO OFFER A PLACE AT BLACKFEN SCHOOL FOR GIRLS

1	Child's name (in CAPITAL letters please):	
	Surname:	First name:
	Date of birth:	

2	Home address (including Post Code:)	

3	Contact telephone number(s) –	
	Home:	Work: <small>(mother/father/guardian) please delete as appropriate</small>

4	Which school has your child been offered?:
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5	To assist in arranging a date suitable to you, please give any dates up to the end of June when you are <b>not</b> available.	
	Do you need an interpreter?	YES/NO
	If YES, which language?.....	

6	The reasons for my appeal are: (please continue on additional sheets, if necessary)

7	Signed:  (mother/father/guardian) please delete as appropriate	Date:
	Please print your name in BLOCK capitals  _____	
Mr/Mrs/Ms/Miss/Dr (please delete as appropriate)		

**Please return this form to:**

Ms Carrie Senior, Headteacher,  
 Blackfen School for Girls,  
 Blackfen Road,  
 Sidcup,  
 Kent  
 DA15 9NU  
 Tel 020 8303 1887  
 Email admin@blackfen.bexley.sch.uk

Date Appeal form received at School.....
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