

Full Name of Child:

Child's Date of Birth:

Appeal Form for Infant/Junior/Primary Schools (NP Form)

This form should only be used to appeal for High Littleton Primary

This completed form should be returned by email by the requested date to admissions_transport@bathnes.gov.uk alternatively you can post it to Admissions & Transport, People & Communities Department, Lewis House, Manvers Street, Bath BA1 1JG.

As this form will be photocopied please complete it in BLACK ink.

Address of Child:	
<u> </u>	Postcode:
Written By:	Name of parent/carer
Daytime Telephone	Home:
Number(s):	Mobile:
Name of School	Preference No (ie 1 st ,2 nd ,3 rd)
Appealing for and	
Preference Number:	1
Reasons for Preference/G	rounds for Appeal
Any information you wish to submit in support of your appeal should be sent in by you, if possible, with	
your letter of appeal.	
Please indicate if supporting evidence is included with this appeal letter. YES/NO (delete as appropriate)	
	(Please Continue Overleaf if needed)

Reasons for Preference/Grounds for Appeal (continued)	