

# KENSINGTON ALDRIDGE ACADEMY

## APPEAL AGAINST ADMISSIONS DECISION

To be completed by parent/guardian. Please read 'Guidance on Admission Appeals to Kensington Aldridge Academy' before completing this form. The form should be returned to the School Admissions Team, 2<sup>nd</sup> floor, Green Zone, Kensington Town Hall, Horton Street, London W8 7NX

### 1. About Your Child

First Name(s)

Surname/ Last Name

Date of Birth (dd/mm/yy)

Boy/Girl

Child's Home Address

  

Postcode

School currently attended

### 2. Parents/Carers Details

Title (Please circle) Mr Mrs Miss Ms

Initials

Surname/ Last name

Relationship to Child

Address (if different from child's address given above)

  

Postcode

Home Tel no.

Daytime Tel no.

E-mail Address

*Please continue overleaf*

#### 4. *Reasons for Appeal*

The reasons for my appeal are as follows:

Please continue on a separate sheet if necessary

#### 5. *Attending the Appeal*

Attending the Appeal (please tick as appropriate):

I wish to attend in person

I do not wish to attend in person

If you require any assistance, eg interpreter (please specify language), wheelchair access, signer, or other, please give details here:

#### 6. *Parental signature*

Signature of  
Parent/Guardian

Date