

## Appeal against decision to refuse admission to Dulwich Hamlet Junior School

Please read the guidance notes on admission appeals before you complete this form

Child's Last Name:		Child's First Name:	
D.O.B.	Year group required:	Boy / Girl	
Parent / Carer Full Names:			
Address:			
Post Code:			
Contact telephone number (Day):			
Contact telephone number (Evening):			
Email Address:			
The reason for you appeal (you may include additional sheets, numbers. (Please number and attach)			
Continue overleaf if necessary			

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If you have accessibility needs in relation to your attendance at the hearing, please give details:

If you require an interpreter at the hearing, please give details of the language:

I have received and read the appeal guidance notes

Signature:

Date:

**COMPLETED FORM AND ANY ATTACHMENTS SHOULD BE RETURNED  
BY NOON ON MONDAY 14<sup>th</sup> MAY**

**To: The Admissions Officer, Dulwich Hamlet Junior School, Dulwich Village, London  
SE21 7AL**

**Email: [cpurcell4.210@lgfmail.org](mailto:cpurcell4.210@lgfmail.org)**