



BEECHEN CLIFF

This form should only be used to appeal for Beechen Cliff School

Please return to: Clerk to the Admission Appeals Panel, Admissions & Transport, Lewis House, Manvers Street, Bath BA1 1JG or by email: admissions_transport@bathnes.gov.uk

LETTER OF APPEAL FOR ENTRY TO YEAR 7 FOR 2024/25

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

Written By:	<i>Name of parent/carer</i>
Full Name of Child:	
Child's Date of Birth:	
Address of Child:	_____ _____ _____
	Postcode: _____
Daytime Telephone Number(s):	
Email:	
Name of School Appealing for:	Beechen Cliff
Please state Preference Number for this school:	Preference No (i.e. 1 st , 2 nd , 3 rd , 4 th or 5 th)

Reasons for Preference/Grounds 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)

