



# Blackfen School for Girls

Raising aspirations - releasing potential.

## 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:
	(mother/father/guardian) please delete as appropriate	

4	Which school is your child attending now?:
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5	To assist in arranging a date suitable to you, please give any dates in the next month 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: <small>(mother/father/guardian) please delete as appropriate</small>	Date:
	Please print your name in BLOCK capitals <hr/>	
Mr/Mrs/Ms/Miss/Dr (please delete as appropriate)		

**Please return this form to:**  
  
 Mr Matthew Brown, 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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