



Thomas Telford UTC

Independent Admission Appeal Form

The form should be sent direct to Thomas Telford UTC. You must complete both sides of this form which must be signed and returned to the address provided overleaf, as soon as possible. The appeals for September must be returned by **Tuesday 29th March 2022**.

Pupil's Personal Details (please complete in **block capitals**)

| | | | | |
|--------------------------------|----------------------|----------------------|----------------------|----------------------|
| Childs Legal Surname: | <input type="text"/> | | | |
| Child's Legal First Name: | <input type="text"/> | Date of Birth: | <input type="text"/> | |
| Present School: | <input type="text"/> | Current School Year: | <input type="text"/> | |
| Full Home Address: | <input type="text"/> | | | |
| | <input type="text"/> | Post code: | <input type="text"/> | |
| Name of person lodging appeal: | <input type="text"/> | | | |
| Relationship to child: | <input type="text"/> | | | |
| Contact Details: | Home: | <input type="text"/> | Mobile: | <input type="text"/> |
| | Email: | <input type="text"/> | | |

Appeal

Please indicate below if you would like to attend the appeal hearing:

I would like to attend the appeal hearing

I would like my appeal to be considered in my absence

Please indicate by ticking the appropriate box if you have difficulties that may require special arrangements:

Physical Interpreter required Other
(Please state language)

