

# Gravesend Grammar School Appeals Form 2023

Pupil ID	
Name of Pupil	
Date of Birth	
Address	
Telephone Contact Numbers	
Email Address	
Child's Primary School	
Reasons for Appeal	
<p>Please continue on a separate sheet if you wish</p> <p>If you or your child have a disability which you believe is relevant to your appeal, please tick this box. <input type="checkbox"/></p> <p>This form is required to inform us of your intention to appeal. We will acknowledge receipt of this and you will later hear from the appeals' clerk who will provide you with information about your appeal and the evidence you will be expected to submit.</p>	
Signed (parent)	
Print name (parent) Mr/Mrs/Ms/Miss	
Date	

Please send the completed form to [appeals@gravesendgrammar.com](mailto:appeals@gravesendgrammar.com) OR:

The Clerk to the Governors, Gravesend Grammar School, Church Walk, Gravesend, DA12 2PR