



## APPEAL PRO FORMA - YEAR 7 2019 ENTRY

I wish to appeal against the decision to refuse my child a place at Trinity Academy

Name of Child	
Date of Birth	
Address of Child	
Name of Parent/carer	
Contact telephone number	
Parent/carer email address	
<p>Please set out the reason(s) for your appeal, in writing below. Please note an appeal cannot be set up without <u>written</u> reasons. (Continue on a separate sheet/s if required)</p>	
Signature of parent/carer	
Dated	
<p>Please complete and return this form by <b>Friday 10th May 2019</b> to Admissions, Cathedral Schools Trust %, College Square, Bristol, BS1 5TS or email; <a href="mailto:admissions@trinityacademybristol.org">admissions@trinityacademybristol.org</a></p>	