



## IN-YEAR CASUAL ADMISSION

### ADMISSION APPEAL for Chatham Grammar

*To be sent in within 20 working days of receiving the outcome letter*

Student's full name		Date of birth			
Gender		Year group required			
Student's home address					
<b>Parent/Carer's details</b>					
Parent/Carer's name (including title)					
Parent/Carer's contact email					
Parent/Carer's contact number					
Do you have legal guardianship of the student?	Yes		No		
Parent/Carer's signature					
<b>Current and Requested School</b>					
Secondary School Requested	Chatham Grammar				
Current School					
Reason for transfer					
<b>What is the basis of your appeal (please tick all the apply)</b>					
<b>Assessment appeal</b> (my child has been assessed as non-selective, but I do not agree with this assessment)			<input type="checkbox"/>		
<b>Oversubscription appeal</b> (my child has not been offered a place because the year group required is full)			<input type="checkbox"/>		
<b>If the student has taken a selective test, please indicate their scores (the panel may ask to see evidence of these results)</b>					
<b>Chatham Grammar pre-admission test</b>	Verbal	Quantitative	Non-Verbal	Spatial	Mean
<b>Medway test (11+)</b>	Extended writing	Maths	Verbal reasoning		Total
<b>Kent test (11+)</b>	Maths	English	Reasoning		Total

**Please return the completed form to the Admissions Assistant, Chatham Grammar, Rainham Road, Chatham ME5 7EH or by email to [admissionscg@universityofkentacademistrust.org.uk](mailto:admissionscg@universityofkentacademistrust.org.uk)**

**Please state clearly your reasons for appeal. Any documentary evidence should be attached.**

Please continue on a separate sheet if you so wish.