**ADMISSION APPEAL FORM**

**Admission appeals for the London Design & Engineering (LDE) UTC will be administered by an Independent Person.**

If you wish to appeal against the non-allocation of a place at the LDE UTC, please return the completed form with any supporting documents to: appeals@ldeutc.co.uk or the address at the end of this form. **This should be done no later than 28 calendar days from the notification date i.e. the date of the letter refusing your college application.**

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| --- | --- | --- |
| Child’s First Names:Click or tap here to enter text. | Child’s SurnameClick or tap here to enter text. | Child’s GenderChoose an item. |
| Child’s Date of Birth:Click or tap here to enter text. | Year Group Applied for:Year 9: [ ]  Year 12: [ ]  |
| Name of Parent/Guardian:Title: Choose an item.First Name:Click or tap here to enter text.Surname: Click or tap here to enter text. | Address:Click or tap here to enter text.Click or tap here to enter text.Postcode: Click or tap here to enter text. |
| Relationship to the Child:Click or tap here to enter text. | Do you have parental responsibility for the child?Choose an item. |
| Home Telephone Number:Click or tap here to enter text.Mobile Number:Click or tap here to enter text. | Email:Click or tap here to enter text. |
| Does your child currently hold a Statement of Special Education Needs or an Education, Health and Care Plan, or is currently under assessment for an Education, Health and Care Plan? | Yes[ ]  | No[ ]  |
| Do you believe your child has a disability as defined by the Equality Act 2010? | Yes[ ]  | No[ ]  |

|  |  |
| --- | --- |
| What school is your child currently attending? | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Please tell us anything about your access needs (e.g. do you need an interpreter, wheelchair access?) | Click or tap here to enter text. |

**You must explain below why you are appealing. Please send any supporting evidence with this form** (please do not send school work or certificates).

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| *(If you need more space, attach a separate sheet making sure you begin with your child’s name and date of birth).* |

**Parent/Guardian Declaration:**

* I confirm that the information given for this appeal is, to the best of my knowledge, true.
* I understand that giving false or misleading information may lead to my appeal not being heard.
* I understand that if I do not attend the appeal hearing (and do not send a representative), my appeal will be heard in my absence on the basis of the information I have supplied on this form and any other information I have submitted by the hearing date.
* I am the parent/legal guardian for the child.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: Click or tap to enter a date.

**Please return your completed form to:**

**The London Design & Engineering UTC**

**University Way, Royal Docks**

**London, E16 2RD**

**Email:** **appeals@ldeutc.co.uk**