

PLEASE COMPLETE BOTH PAGES OF THIS FORM

Please tick the following as appropriate:

I wish to attend the appeal in person.

I do not wish to attend the appeal and would like my appeal in writing to be considered by the Panel.

If you wish to be accompanied to the hearing, please provide the name/s of the person/s who will come with you and the capacity in which they will attend:

If you require an interpreter*, please indicate which language: _____

**Please note, the school hires interpreters at its own expense. If you can bring a family member or friend to interpret for you, you are welcome to do so. Please indicate this in the section regarding accompaniment and only fill in the interpreter section if absolutely necessary.*

Signature: _____ Date: _____

This form and any supporting documents must be returned to:

Ms Duska Cutler
Appeals Administrator
Camden School for Girls
Sandall Road
London NW5 2DB

Or by email to dcutler@csg.school