

SECTION 4: ARRANGEMENTS FOR THE APPEAL			
Do you have any difficulties that may require special arrangements? Physical If YES, please detail:		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Language If YES, please detail:		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Hearing If YES, please detail:		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are you planning to attend the appeal hearing? (If you do not attend the appeal hearing the panel will make a decision on the written information)		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you intend to be accompanied by a friend or advisor to assist in the presentation of your case ? If YES, please detail:		Yes <input type="checkbox"/> No <input type="checkbox"/>	
I understand that the information I have provided on this form is true to the best of my knowledge and understand that any false or deliberately misleading information on this form and/or supporting papers may affect the outcome of my appeal.			
SIGNATURE:		DATE:	

The completed form should be sent to:
Mrs A Middleton Hill
C/O St Thomas More Catholic Academy, Longton Hall Road, Longton, Stoke-on-Trent, ST3 2NJ

Date Received by the Board of Directors	
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