



Year 7, 2018 Appeal Application

Please complete both pages this form. Email it, along with all relevant, supporting documents, to Susan Jones, Academic Facilitator, at susanj@fitzroyhs.vic.edu.au by **Friday 18 August, 2017**

Section 1: School Details

Current Primary School	
Designated Neighbourhood Secondary Government School	

Section 2: Student Details

Given Name		Date of Birth	
Family Name		Gender	
Permanent Residential Address			
Suburb		Post Code	

Section 3: Parent/Carer Details

Contact 1 Given Name		Contact 2 Given Name	
Contact 1 Family Name		Contact 2 Family Name	
Contact 1 Phone Number		Contact 2 Phone Number	
Contact 1 Email		Contact 2 Email	
Contact 1 Address		Contact 2 Address	

Section 4: Government School Placement Preferences

Please indicate the order of preference in which you placed Fitzroy High School on the **Application for Year 7 Placement form**, distributed by and returned to your child's primary school. Please circle the relevant number. Please note that we filled all our places with first preference applications.

Fitzroy High School Preference	1 st	2 nd	3 rd

Section 5: Grounds for Appeal

Please state your grounds for appeal and why you believe your application should be reviewed.

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Section 7: List of supporting documentation

Category	Supporting Documentation
1.Designated Neighbourhood Government Secondary School	
2.Sibling	
3.Curriculum Grounds	

Section 6: Signature of Parents/Carers

I certify that the above information is correct.

I certify that the above information is correct.

Contact 1 Signature		Contact 2 Signature	
Date		Date	