



ANNEXURE A

APPEAL FORM

PART 1: PARENT/GUARDIAN			
<p>I,, parent/guardian of in grade at(name of school) wish to appeal against the promotion/progression decision made about my son/daughter for the following reason(s):</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>			
Contact details of parent/guardian	Address:	Cell no.	Home tel. No. Work tel. No.
Signature:		Date:/...../20.....
PART 2: PRINCIPAL			
<p>I,, principal of have investigated the above appeal and have decided that: (Please tick in the appropriate box).</p>			
	<input type="checkbox"/> The original decision should be upheld, i.e. the learner will remain in the same grade.		
	<input type="checkbox"/> The original decision should be overruled, i.e. the learner will be allowed to progress to the next grade.		
Reason(s):	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>		
Signature:		Date:/...../20.....
<p>If you are not satisfied, you may contact the district director at:</p> <p>Tel. No:..... Email:.....</p>			

PART 3: CIRCUIT MANAGER

I,, Circuit Manager of the Education District, have investigated the above appeal and have decided that: (Please tick in the appropriate box).

	The original decision should be upheld, i.e. the learner will remain in the same grade.
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	The original decision should be overruled, i.e. the learner will be allowed to progress to the next grade.
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Reason(s):
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Signature:		Date:/...../20.....
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PART 4: DISTRICT DIRECTOR

I,, Director of the Education District, have investigated the above appeal and have decided that: (Please tick in the appropriate box).

	The original decision should be upheld, i.e. the learner will remain in the same grade.
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	The original decision should be overruled, i.e. the learner will be allowed to progress to the next grade.
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Reason(s):
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THIS DECISION IS FINAL

Signature:		Date:/...../20.....
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