



## The Bishops' C of E & R C Primary School

Please read **A Guide to School Admission Appeals** before completing this form.

### SCHOOL ADMISSION APPEAL NOTICE OF APPEAL FORM

I am appealing for a place at:

and would like my child to start: *(date)*

Child's full name:

Male or Female *(delete as appropriate)*

Child's date of birth:

My name *(Mr. Mrs. Miss, Ms other):*

My relationship to the child is *(parent, guardian, relative):*

Current address *(including Post Code):*

*I am in the process of buying/renting a new property. I attach a copy of a letter from my solicitor/copy of my tenancy agreement confirming my new address and the date on which I expect to move in.*

**Contact details:**

Telephone (home)

Telephone (work)

Mobile:

Email: *(please write clearly)*

*(if you supply an email address we will acknowledge your application by email)*

**My child currently attends** *(name of school or nursery):*

**My child is currently in year group:**

**My child has been offered a place at:** *(name of school)*

**To begin in year group:**

**Please list the schools you have applied for:**

1.

4.

2.

5.

3.

6.

**Please tick one of the following boxes to indicate attendance at the appeal hearing:**

I will attend the appeal hearing:

I will not be able to attend the appeal hearing:

I will not be able to attend the appeal hearing but someone will attend on my behalf

I will not be able to attend the appeal hearing and understand that the panel will base their decision on my written reasons and evidence:

**Please tick the box if you are happy to waive your rights to 10 school days' notice of your appeal hearing.** This may enable us to timetable your appeal earlier than otherwise expected.

I am happy to waive my rights:

I am not happy to waive my rights:

I will need a signer, an interpreter who speaks the following language at the appeal hearing:

Signer  Please state language.....

Interpreter

I have a disability and need the following adjustments made at the venue:

.....

**Reasons for appeal: (you must complete this section):**

- Give full reasons for your appeal and continue on a separate sheet if necessary.
- Attach any additional paperwork securely.

- If your appeal is for an Infant Class Size Refusal, please state on which grounds you are appealing:
  - A. The admission of additional children would not breach the Infant Class Size, or
  - B. The admission arrangements did not comply with admissions law or were not correctly and impartially applied and the child would have been offered a place if the arrangements had complied or had been correctly and impartially applied; or
  - C. The decision to refuse admission was not one which a reasonable Admission Authority would have made in the circumstances of the case.

**Declaration:**

All information given is correct to the best of my knowledge and I am the person with parental responsibility for the child named on this form.

Signed .....

Date .....

If you are producing additional paperwork, please list it below:

<u>Description of paperwork</u>	<u>Attached</u>	<u>Sending later</u>
1.		
2.		
3.		
4.		
5.		
6.		

Please return your completed form marked **Private and Confidential** to:

**Admissions Office**  
**The Bishops' C of E & R C Primary School, Beardsley Drive, Springfield, Chelmsford, Essex CM1 6ZQ**

We cannot be held responsible for forms that are lost in the post, sent or delivered to other locations.