

School Admission Appeal Form

Section 1: Your Appeal

For which Year Group has your child been refused a place?		
On what date did you apply for a school place? (the date you inserted on your original application form)		
What is the date on the refusal decision letter issued to you by the Admissions Authority?		
For School Office use	Insert the date on which the admission application to which this appeal relates was received at the School Office	
Only:	Insert the date on which this Appeal Form was received at the School Office	

Section 2: Your Child's details (the child who is the subject of this appeal)

Last Name	First Name	Middle name(s)
Date of Birth: Day/Month/Year		
Registered Nationality		
Is your child <u>currently</u> on the roll of a UK school?	Yes	No
If 'Yes' please provide the name of the school		
When did he/she last attend school? Month/Year:		
Is your child <u>currently</u> A 'Looked After Child'. A child in the care of a Local Authority?	Yes	No
Does your child have a Statement of Special Educational Needs issued by a Local Authority?	Yes	No
Does your child have any siblings <u>currently</u> attending this school? A sibling definition applies which is set out in the published Admission Arrangements document	Yes	No

If 'Yes' you may choose to provide sibling details as part of your response in Section 3

Please enter the address at which your child lives for the majority of his/her time

How long has he/she lived at this address?	Years:	Months:	Weeks:

Are there currently any shared residency arrangements?	Yes	No
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Section 3: Your details (the person submitting this appeal)

Last Name	First Name	Title

Your relationship to this child	Parent	Carer	Other
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Do you live at the same address as the child you are appealing on behalf of	Yes	No
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If 'No' then please provide your full address for communication purposes

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Land line telephone number	Mobile	Email address

Section 4: Your appeal against the decision to refuse admission

Is your intention to be present in person at your appeal hearing? The appeal hearing will be scheduled to take place in accordance with the Appeals Timetable published on the School website	Yes	No
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If you intend that another person represents you or accompanies you to the hearing, please provide their name(s) and position

Name	Position

Please explain why you are appealing against the decision to refuse your child a place at the school. You, or your representative(s) will have the opportunity to present your case at the appeal hearing and to expand on the information you set out below.

Continue with your statement:

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Section 5: Declaration and Signature

In signing this declaration, you confirm that

The information that I have provided on this appeal form is honest and not intended to mislead in any way

The information provided on this Appeal Form may be shared by the Admission Authority for the purpose of responding to any points I have set out and for the preparation of my appeal hearing, subject to the Data Protection Act 1988.

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| (a) I am entitled to make this appeal as I am the legal Parent/Carer of the child concerned
(b) I have the appropriate consent from the legally responsible party to make this appeal on his/her behalf |
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Signature of the applicant (Appellant)	Date:

Important information relating to the completion of the Appeal Form

School Admission Appeals are subject to the requirements of the 2012 School Admission Appeals Code, issued by the Department for Education. A copy can be viewed or downloaded at www.education.gov.uk

The Queen Elizabeth's School Academy Trust is the Admissions Authority responsible for arranging appeal hearings that arise in connection with decisions to refuse admission to the academy. It is recommended that before submitting an appeal, you refer to the Trustee's published Admission Arrangements which can be downloaded from the academy website or a paper copy made available from the academy Reception Office

The Appeal Form has been designed to gather the information necessary to ensure that your circumstances are clear and that your appeal hearing can be efficiently and effectively scheduled within the statutory timeframe set out in the appeal timetable published annually on the academy website.

You, or your appointed representative must use this Appeal Form to explain the reasons for the appeal against a decision to refuse admission. The completed Appeal Form will be set before an independent appeal panel at the appeal hearing.

You may hand-deliver your appeal form to the Academy Reception Office, or send to the Academy by post or email attachment. Safe delivery and the security of the information provided on the appeal form during transit, is the responsibility of the appellant. It is advisable to post by a special delivery service or to obtain a receipt if hand delivered:

School Address: Queen Elizabeth's School, Wimborne, Dorset, BH21 4DT
Email: admissions@queenelizabeths.com

Complete this Appeal Form in full and ensure that you date and sign the declaration before submitting to the Academy Office

A separate Appeal Form must be submitted for each child

Additional information may be provided to the Clerk up to two calendar days before your appeal hearing. No new information may be presented at the hearing, unless the Chair of the Appeal Panel specifically permits this in exceptional circumstances.

Issue: ACADSecV8 2015