

St Peter's CofE Primary School
Old Church Road, Harborne, Birmingham B17 0BE
Chair of Governors: Fr. Graeme Richardson

NOTICE OF APPEAL AGAINST ADMISSION DECISION

NAME OF CHILD:	Is your child attending school now?
ADDRESS:	If YES please state school:
	If NO please state last date of attendance at school:
TELEPHONE NO:	Have you recently moved into the area?
DATE OF BIRTH:	AGE:
	If YES please state the date:

Have you any other children attending this school now? If so please state their name(s) and date(s) of birth:

Name: Date of birth:

Name: Date of birth:

Reason for appeal (continue overleaf and/or on another sheet as necessary):

Continued overleaf

You may attend the appeal personally and bring a friend/representative with you to assist in the presentation of your case. If you are unable to attend, or do not wish to, the appeal may be heard on the basis of written evidence.

Will you come to the appeal? Yes / No

Will you bring someone with you? Yes / No

If yes, please state their name and relationship to you (*eg parent/friend*):

.....

Will you need a translator? Yes / No

If you have said yes, please state which language:

Will you need any other special arrangements at the hearing? Yes / No
(*eg access requirements/hearing loop*)

If you have said yes, please state what you will need:

.....

.....

I [*please write your name clearly*]

wish to appeal against the refusal of a primary school place for my child for Year Group

at [*name of school*]

Parent/guardian signature: Date:

Please return this form to the Chair of Governors at the school address above