

## **School Admission Appeal Form**

### Section 1: Your Appeal

For which Year	Group has you	r child been refused a place?		
On what date di inserted on your				
What is the date				
by the Admissio	ns Authority?			
Insert the date on which the admission application to which this appeal relates was received at the School				
use				
Only: Insert the date on which this Appeal Form was recat the School Office				
Section 2	: Your Child	's details (the child who is th	e subject of tl	nis appeal)
Legal Surname		First Name	Middl	e name(s)
Date of Birth: Day/Month/Year				
Registered Natio	onality			
Is your child <u>cur</u>	<u>rently</u> on the r	roll of a UK school?	Yes	No
If 'Yes' please p	rovide the nam	ne of the	1	1
When did he/sho Month/Year:	e last attend so	chool?		
Is your child <u>cur</u> care of a Local <i>i</i>		ed After Child'. A child in the	Yes	No
Does your child Needs issued by		ent of Special Educational rity?	Yes	No

school?	Does your child have any siblings <u>currently</u> attending this school?						
A sibling definition applies w							
Admission Arrangements							
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 <u>majority</u> 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			
Section 3: Your deta	<u>ils</u> (the person sub	mitting this ap	peal)				
Surname	Fore	Forename		Mr/Mrs/Miss/Ms/other			
V 1 ( 1 ( 1 ( 1 )	<b>D</b> 1			\.1			
Your relationship to this	Parent	Carer	(	Other			
Your relationship to this child	Parent	Carer	(	Other			
child							
Do you live at the same addr				Other No			
Do you live at the same addr	ess as the child you	ı are appealin	g Yes				
Do you live at the same addr	ess as the child you	ı are appealin	g Yes				
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Do you live at the same addr	ess as the child you	ı are appealin	g Yes				
Do you live at the same addr	ess as the child you	ı are appealin	g Yes				
Do you live at the same addr on behalf of If 'No' then please provide y	ess as the child you	ı are appealin	g Yes	No			
Do you live at the same addr	ress as the child you	ı are appealin	g Yes on purposes	No			
Do you live at the same addr on behalf of If 'No' then please provide y	ress as the child you	ı are appealin	g Yes on purposes	No			
Do you live at the same addr on behalf of If 'No' then please provide y	ress as the child you	ı are appealin	g Yes on purposes	No			

# Section 4: Your appeal against the decision to refuse admission

Is your intention to be present in person at your appeal		Yes	No			
hearing?						
A hearing will be scheduled to take place within 30 school da	ays of					
receipt of this appeal form.						
If you intend that another person represents you or accompanies you to the hearing,						
please provide their name(s) and status	T					
Name		Status				
	I					
Please explain why you are appealing against the dec	ision to r	efuse your c	hild a place			
at the school. You, or your representative(s) will have the						
the appeal hearing and to expand on the information you set						

Continue with your statement:	
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	t intended to mislead in
any way	
The information provided on this Appeal Form may be shared by the Admi:	ssion Authority for the
purpose of responding to any points I have set out and for the preparation	
subject to the Data Protection Act 1988.	5
(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	
their behalf	
Signature of Appellants	Datas
Signature of Appellant:	Date:

#### <u>Important information relating to the Appeal Process</u>

#### Please read this information carefully before completing an appeal form:

School Admission Appeals are subject to the requirements of the School Admission Appeals Code, issued by the Department for Education. A copy can be viewed or downloaded at <a href="https://www.education.gov.uk">www.education.gov.uk</a>

Gordano School is an Academy and the Academy Trust is the Admissions Authority responsible for arranging appeal hearings that arise in connection with decisions to refuse admission to the Academy.

Arrangements for admission appeals in connection with the Academy are set out in the published Admission Arrangements which can be downloaded from the Academy website or a hard copy can be obtained from the School Office

The Appeal Form has been designed to gather the information necessary to ensure that your circumstances are clear and that an appeal hearing can be efficiently and effectively scheduled within the statutory timeframe set out in the Appeals Timetable available on the Academy website (within 30 or 40 school days of receipt of the appeal form, depending on the circumstances of the original application).

The completed Appeal Form may be hand-delivered to the Academy Reception Office, or sent 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 Special Delivery service and to obtain a receipt if hand delivered.

Address: Gordano School, St Mary's Road, Portishead, BS20 7QR

Email: admissions@gordanoschool.org.uk

- 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
- If you decide to appeal, this will not affect any school place your child currently holds or that has been provisionally or otherwise offered for your child.
- Your appeal will be administered and clerked independently of the Admission Authority.
  The appeal clerk will contact you regarding a proposed date and time for your appeal
  hearing as soon as possible after receipt of your completed appeal form. Please ensure that
  your contact details are entered correctly for this purpose.
- Approximately <u>10</u> calendar days before your scheduled hearing you will receive a written statement from the Admissions Authority setting out the reasons why a place cannot be made available at the school for your child.
- Additional information may be provided to the Clerk or appointed Appeal Administrator, up to two calendar days before your appeal hearing. No new information may be presented at the hearing, although the Appeal Panel may consider this in exceptional circumstances.