

BUCKINGHAM PARK CHURCH OF ENGLAND PRIMARY SCHOOL ADMISSION APPEAL FORM

Please complete and return to the Chair of Governors through the school office.
Please mark your envelope 'Admission Appeal'.

Name of Parent/Carer:			
Address:			
Postcode:			
Daytime telephone:		Evening telephone:	
Email:			

We/I wish to appeal against the Governors' decision to refuse a place for:			
Name of child:			
Date of birth:		Year Group:	
Starting date sought:			
Criterion for entry (as per published admissions criteria):			

Signed: _____ Date: _____

Notice of hearing date – agreement to reduction in notice time

The Clerk to the Independent Panel is normally required to give you 10 school days' notice of the hearing date. However, you may waive your right to that notice in order that your appeal may be heard at an earlier date, but this may result in the case papers being sent to you just before the hearing instead of the usual timescale.

I wish to waive my right to the 10 school days notice of the hearing and I understand that this may result in a shorter time scale to consider the case papers.

If you wish to waive your right print and sign your name below:

Signed: _____ Date: _____

Please turn over.

Grounds for appeal - *Please give details of the reasons why you believe your child should be admitted to the school. You should ensure you include any documents that you feel might strengthen your case. **The grounds for your appeal must be set out in writing (School Admissions Appeal Code 2012 para 2.5)***

Signed: _____

Date: _____