



## SCHOOL ADMISSION APPEAL FORM YEAR 3-13

**DO NOT USE THIS FORM FOR RECEPTION, YEAR 1 OR YEAR 2** (please complete Appeal form for Reception Year 1 OR Year 2)

Before completion, you are advised to read the Parent Information on school admission appeals for years 3-13 available on the BCP Council website. This gives further information about the appeals process.

Please provide the following information in full, stating "not applicable" where appropriate. The decision of the Appeal Panel will be based on the facts, information and supporting evidence provided at the time of the appeal. False information will invalidate your appeal.

**Please complete in block capitals using black ink**

*Please tick as appropriate*

I/We are appealing for a place     (a) now     (b) in September     (c) other

School appealing for \_\_\_\_\_

Have you had an appeal heard in the last year?     Yes     No

Is the child looked after or previously looked after by the Local Authority?     Yes     No

Child's current school \_\_\_\_\_

Child's legal surname \_\_\_\_\_

Child's first name(s) \_\_\_\_\_

Date of birth \_\_\_\_\_ Year group \_\_\_\_\_

Parent(s)/Carer(s) names \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone numbers \_\_\_\_\_

Email \_\_\_\_\_

Child's faith or religion \_\_\_\_\_

Is your child baptised?     Yes     No

Details of other children in the family:

Name(s)	Date of Birth	School(s) attended	Current Year Group

## GROUNDS FOR APPEAL

**DO NOT USE THIS FORM IF YOU ARE APPEALING FOR RECEPTION, YEAR 1 OR YEAR 2** (please complete Infant Appeal form)

Please set out clearly and fully all your reasons for your appeal and all the grounds upon which your appeal is based. If you have evidence that you want to use to support your appeal it is your responsibility to obtain and attach it to this form (or send it to the School Appeals Officer at least seven days in advance of the hearing).

*Please continue on a separate sheet if necessary*

I will need an interpreter or signer at the Appeal Hearing

<input type="checkbox"/>	Yes*	<input type="checkbox"/>	No
<input type="checkbox"/>	Yes*	<input type="checkbox"/>	No

I will require special arrangements for the Appeal Hearing

*\* Delete which does not apply and provide details below if necessary*

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**General Data Protection Regulation (GDPR) and Data Protection Act (DPA) 2018** – We process your personal information in accordance with GDPR and Data Protection Act 2018. If you would like to know how we use your information, please see our Privacy Notice on the Council's Privacy policy link.

In accordance with the DPA 2018 we are required to keep the information we hold about you up to date and accurate. By signing this form you are confirming the information is correct.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Please return this form and any supporting documentation you wish to be considered by the Appeal Panel before the deadline for lodging an appeal which can be found on the school website, for the attention of Mrs S Wallace-Abbott, the Clerk to the Governing Body, St Peter's School, St Catherine's Road, Bournemouth BH6 4AH or by email to [swo@st-peters.bournemouth.sch.uk](mailto:swo@st-peters.bournemouth.sch.uk)

If you have any documentation to submit after receiving the appeal hearing notification letter sent to you by the Clerk to the Appeals Panel, please send it to the Clerk to the Appeals Panel at:

Appeals Officer, BCP Education Appeals Service, BCP Civic Centre, Bourne Avenue, Bournemouth, Dorset BH2 6DY

Tel: 01202 118911

Email: [school.appeals@bcpcouncil.gov.uk](mailto:school.appeals@bcpcouncil.gov.uk)