

**Appeal against refusal of a school place –
Reception, Year 1 or Year 2 classes
(Key stage 1)**

If you have been refused a place at a school you have the right to appeal to an Independent Appeals Panel. Please be aware there are very limited grounds that can be considered by an Appeals panel and only a small number of Appeals each year are successful.

Before applying, please read the Appeals guidance carefully to understand your chances.

Please ensure you complete and return all 3 pages of this form. If you are completing your form by hand, please write clearly and in dark ink, as it will be copied.

Which school is this Appeal for? _____

What is the name of the child that was refused the place?

First name _____ Surname _____

Date of birth ____ / ____ / ____ (day/month/year) Gender Boy Girl

Current school _____

Please provide your name and contact details

Title _____ First name _____ Surname _____

Current address _____

_____ Postcode _____

Phone number _____ Mobile number _____

Email address _____

Please provide the names of any brothers or sisters, their dates of birth, and their current school (this can include foster or adoptive siblings)

Child's name _____ Date of birth _____ School _____

Child's name _____ Date of birth _____ School _____

Child's name _____ Date of birth _____ School _____

Please clearly set out the detailed reasons for your appeal in the text box.

You are advised to provide additional evidence to support your Appeal. This must be directly related to the grounds for Appeal that the panel can lawfully consider. At the Appeals Hearing, you will be required to present your case to the panel and answer questions about the information provided.

You must submit any supporting evidence with your Appeal form, or confirm to the Appeals Clerk that additional evidence will be forwarded at a later date. All evidence must be received by the Appeals Clerk before the date of your Appeal Hearing or it may be ruled inadmissible by the panel.

I wish to appeal against the decision not to admit my child to this school because:

To help us process your Appeal efficiently please give us the following information

Do you have any accessibility requirements (communication, access etc)?

Please state these _____

I need an interpreter to help me at the Hearing (please state which language)

I need papers in **LARGE PRINT**

I confirm that the statement above is truthful and I understand that any additional evidence to support this appeal must be provided before the date of the hearing or may be ruled inadmissible by the Appeals Panel.

Parent/carers signature _____ **Date** _____

Please return your form to: Clerk to the Appeals Panel, Complaints and Customer Relations Team, Newcastle City Council, Floor 4, Civic Centre, Newcastle upon Tyne NE1 8QH.

Email: schoolappeals@newcastle.gov.uk

Phone: 0191 277 7427

Please note that generally we do not acknowledge receipt of your school Appeal, however once we receive your Appeal we will begin to process it. We endeavor to schedule your Appeal as soon as possible, and we will give you 10 school days notice of your Appeal hearing.