### ST MARY'S CATHOLIC PRIMARY SCHOOL



## FORM "A"

# ONLY COMPLETE THIS FORM IF YOU ARE APPEALING FOR A PLACE IN YEAR R, YEAR 1 OR YEAR 2

#### **SCHOOL ADMISSION APPEAL**

(PLEASE COMPLETE IN BLOCK CAPITALS USING BLACK INK)

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.

invalidate your appeal.					
I/We are appealing for a place Please tick as appropriate (c) other please specify	, ,		(b) in September		
Preferred school					
Catchment area school					
Have you had an appeal hea	ard by either D	orset or I	Bournemouth in the last year?		
Is the child looked after by the Local Authority?					
Child's present school					
Child's Surname					
Child's First name (s)					
Date of Birth	Ye	ear Group	)		
Parent(s)/ Carer(s) names					
Address					
		P	ostcode		
Telephone numbers: Home		,	Work		
Details of other children in th					
Name(s)	Date of	of Birth	Schools(s) attended		
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#### **GROUNDS FOR APPEAL**

#### PLEASE COMPLETE THIS FORM IF YOU ARE APPEALING FOR A PLACE IN YEARS R, 1 OR 2

Please set out clearly the grounds upon which your appeal is based. If there are any documents to be provided in support of your appeal it is your responsibility to ensure that they are obtained and attached to this form (or sent at least seven days in advance of the hearing to the Head of De

Democratic Services at the address below)
i) I appeal because St Mary's Admission Authority have been unreasonable in refusing my application for my preferred school in the circumstances of the case, i.e. that it has acted in a way that no reasonable Local Education Authority would have acted because
ii) I appeal because the admission arrangements have not been implemented correctly within the terms of the published admission policy and my child would have been admitted if the arrangements had been implemented correctly because
If necessary please continue on a separate sheet.
Signed Date
Please return this form to:
The Admissions Officer

The Admissions Officer St Mary's Catholic Primary School Devon Road Poole BH15 3QQ