

THE TRUE LEARNING PARTNERSHIP Admissions Appeals Form

If you are appealing for more than one child please complete a separate form for each child and each appeal.

School:		Year Group:	Year Group:			
Child details	Surname:	Forename:	Forename:			
	DOB:	Male/ Female (Male/ Female (please delete as appropriate)			
School currently attended	ding/ last school attended:					
Date child left (if applie	cable):					
			Yes√	No√		
Is the child 'Cared for'	by a Local Authority (in public ca	rola	Tesv	INOV		
	ch Local Authority and provide a					
ii yes, piedse state wiii	en Edear Nathority and provide a	contact number.				
Does your child have a statement of Special Educational Needs?						
Is your child permanently excluded from school?						
то у сан сина регинанс						
Annellant's names: (na	arents, guardian or carer) Mr/Mrs	s/Miss/Ms/Dr (please delete	as appropriate)			
, appending 5 marriest (pe	in entities, guar attain on ear en, inin-	5, 11155, 1115, 21 (prease derete	as appropriate,			
Relationship of appella	ant to child: (please specify paren	nt/guardian/carer/other)				
Do you intend to be pr	esent at the appeal hearing: Yes	s/ No (please delete as appro	priate)			
		L LGailli	lig			
Have you any special r	equirements i.e wheelchair acces	ss/ hearing problems? Yes/ N	lo (please delete as	appropriate)		
If yes please give detai	ls overleaf.	nersnib				
Current address:		Address in Cheshire Ea	Address in Cheshire East to which you are moving: (if			
		applicable)	applicable)			
6			Dest and to			
Post code		Post code				
E mail address:	na la pura.	Date of moving:				
Telephone contact nur	nbers:					
Fan affica was	and.					
For office use	<u>oniy</u>					
Date received		Child's catchment school				
Confirm PAN read	ched	Presenting Officer				
Logged on systen	1	Passed to legal				
Acknowledged		Processed by				

Do you have any other school aged children? If so, please indicate their names, ages and schools they attend.

Name	Date of Birth	Name of child's present school	

Please state your reasons for seeking a place at this school (e.g moving into the area/ domestic arrangements etc). If you are stating medical, psychological or social reasons PLEASE ENSURE THAT
PROFESSIONAL EVIDENCE IS ATTACHED e.g a letter from a doctor or professional stating the medical or social reasons which require your child to attend this particular school.
or social reasons which require your china to attend this particular school.
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The TRUF Learning
Partnership
(continue on separate sheet if necessary)
Any other specific needs (give details):
I wish to appeal against the decision of the Governing Board of Lostock Hall Primary School not to allocate a place for my child at this school named overleaf.
Signed: Date:
Please return this form to Lostock Hall Primary School

Notes for parents:

APPEAL AGAINST ADMISSION DECISION - PRIMARY SCHOOL TRANSFER AND IN-YEAR ADMISSIONS

If your child has been refused a place at the school of your choice, or you are unhappy with the school allocated to your child, you have the right to appeal against the decision to the Independent Appeals Panel in accordance with the School Admission Appeals Code of Practice. You may appeal to an Independent Appeal Panel, whose members will include people who have an experience in education, and are acquainted with education conditions in Cheshire.

After completion, please return the form to:

Lostock Hall Primary School Mallard Crescent Poynton Stockport SK12 1XG

All appeals should be returned to the above address within 21 days of completion.

In the case of Lostock Hall Primary School, the School will administer all appeal arrangements. All appeals should be returned directly to Lostock Hall Primary School.

In coming to their decisions, appeal panels have to take into account:

- The wishes of the parent/ carer
- II. The arrangements for admissions published by the Governors, including the number of children to be admitted, the criteria for admissions and the arrangements for admitting students in the event of there being more applicants than places (oversubscription criteria).

If you have any professional documentation such as Doctors/ Consultants/ Social Worker letters to support your reasons for choosing Lostock Hall Primary School, you should include these with the form or send them prior to the Appeal Hearing.