

**Notice of Parental Appeal against a decision not to offer a place at Goose Green Primary School**

I wish to appeal against the decision not to offer my child a place at Goose Green Primary School.

1. Child’s name (in CAPITAL LETTERS please):

Surname ……………………………………….. First name ………………………………..

Date of birth ……………………………………. Year Group……………………………....

2. Home address ………………………………………………………………………………...

…………………………………………………………………………………………………..

…………………………………………………………………………………………………..

………………………………………………….. Post Code ……………………………….

3. Contact telephone number(s):

Home .………………………………………… Other ………………………………………

4. To assist in arranging a date suitable to you, please give any dates up to the end of

July when you are not available.

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5. Do you require an interpreter YES/NO

If YES, which language? ……….…………………………………….

**There are only three grounds on which appeals to infant classes may be considered. Please indicate below, which of these grounds you believe applies in your case.**

6. The reasons for my appeal are: (Please continue on separate sheets if necessary)

a) That the admission of my child would not breach the infant class size limit

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b) That a place would have been offered if the admission arrangements had complied with

admissions law or had been correctly and impartially applied.

For your appeal to succeed on this ground, you will have to show that the normal admission arrangements as published by the Admission Authority were not properly followed and, if they had, your child would have been offered a place.

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c) That the decision not to admit your child was not one which a reasonable Admission

Authority would make in the circumstances of the case.

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Signed ………………………………………………… Date ………………………………………

(mother/father/legal guardian/carer)

Title: Mr/Mrs/Miss/Ms …...……… Name: …………………………………………………………..

**Please return the completed form to:** [office@goosegreenprimaryschool.org](mailto:office@goosegreenprimaryschool.org) or hand in a paper copy to the school office.