

THE PRIORY RUSKIN ACADEMY ADMISSION APPEAL FORM

If your child has an Education, Health and Care Plan, you must contact Lincolnshire County Council's Special Educational Needs Team on 01522 553332.

Please complete this form and return it to: Admission Appeals, Administration Team, The Priory Ruskin Academy, Rushcliffe Road, Grantham NG31 8ED.

Appeals will be heard within 40 school days of the deadline for block appeals; or within 30 school days of receipt for in-year appeals. Please inform the school your child has been allocated if you have a pending appeal and you do not wish to start at the allocated school until the result is known.

Once returned, you will receive a written acknowledgement of this form within five working days. If you do not receive an acknowledgement within this time, please contact the academy on 01522 889977.

Please use block letters and write in black ink or ballpoint pen.

School you are appealing for: Name of child who is the subject of the appeal: Gender: Male Female Date of birth: School child currently attends: If your child has been offered a place at an alternative school, please tell us below: Contact details of person appealing on behalf of the child: Full name: Relationship to child: Address:Postcode Mobile phone number: Please note - If your telephone will not accept anonymous calls, we will not be able to contact you by telephone regarding this appeal. Email address: Child's postal address if different: Postcode.....

address between the date	e you send in your admi read carefully the sect	ission appeal form and t	w. If you are likely to change he date you wish your child to Appeals: A Guide for Parents
		· · · ¬	Exchanged contracts
Moving in with partner or (Please provide evidence a photocopy)			Other L e of contracts. This should be
Details of the move, inclue	ding dates:		
Other children living in the	e same household unde	er 19 years of age:	
<u>Name</u>	Date of birth	Current schools	Have you appealed before?
			Yes 🗖 No 🗖
			Yes 🗖 No 🗖
			Yes 🗖 No 🗖
If you have appealed for a	a Lincolnshire school be	efore, please give details	including dates:
You are legally entitled to an appeal more promptly			beal. Sometimes we can hear
Do you waive your right to 10 school days notice?			Yes 🗖 No 🗖
Have you received a letter refusing your child a place at this school? Yes Ves No If yes, please attach a copy.			
Or was this a verbal refusal?			Yes 🗖 No 🗖
Will you be attending the appeal?			Yes 🗖 No 🗖
arranging the appeal. How be changed.	wever, appeals for the n	nain Year 7 intake are pl	try to avoid these dates when anned in advance and cannot
Name and address of per		:	

Their relationship to the child:				
If not attending, will anyone represent you at the appeal? Yes 🛛 No 📮				
Name, address and organisation (if applicable) of the person representing you:				
Do you require an interpreter; there will be no charge for this service? Yes 🗖 No 📮				
If yes which language? Please state dialect if relevant				
Do you require the services of a signer, there will be no charge for this service? Yes \Box No \Box				
Please state if you have any mobility issues so that suitable arrangements can be made.				
Reason for appeal Please give the reasons why you want a place for your child at the school. Please attach securely copies of any supporting documents, eg medical certificates. The panel can consider anything that you feel is relevant (see School Admission Appeals: A Guide for Parents and Carers).				

Please continue on a separate sheet if necessary and securely attach to this form. Any supporting information should be photocopies of the original where possible.

Please give contact details of any other person who has parental responsibility for the child. Please give full name, address, telephone number and relationship to the child:

..... Yes No Do you provide consent for us to contact this person? Please note, if you state no, we may contact you for further details. **Declaration, please tick:** I declare that I am the parent of or have parental responsibility for the child who is the subject

of this appeal.

Signed:

Date:

Data given on this form will be stored in paper format and on a secure computer system and will be used solely for the purpose of processing this school appeal. The information will be shared with Lincolnshire County Council's School Admissions Team and Lincolnshire County Council's Legal Services Team for the purposes of arranging your appeal only. The Priory Ruskin Academy will fulfil its requirements under the Data Protection Act in processing your data.