St Michael's
C.E. Primary School

Nantmel Grove
Bartley Green
Birmingham
West Midlands
B32 3JS

0121 464 4345

office@stmichaelsb32.bdmat.org.uk

NOTICE OF APPEAL AGAINST ADMISSION DECISION

NAME OF CHILD: Gender: Male / Female HOME ADDRESS: EMAIL ADDRESS: *(essential so that we can send you the meeting link)* Telephone Number: Child's Date of Birth: AGE:	Is your child attending school now? If YES please state which school: If NO please state last date of attendance at school: Have you recently moved into the area? If YES please state the date:

Do you have any other children now attending the school applied for? Yes / No
If so, please state their name(s) and date(s) of birth:

Name: Date of birth:

Name: Date of birth:

Reason for appeal (you <u>must</u> give a written reason; if you do not, no appeal will be arranged).
Please give as much detail as you can so that the Panel and the School will understand your reasons. *(continue on another sheet as necessary)*

Continued overleaf

IMPORTANT

The new Admissions Appeals Code 2022 gives Admission Authorities flexibility as to how appeal hearings are held. All appeals are currently being held remotely via the **Zoom** video-conferencing platform. (Please DO NOT go to the school or the church of England Birmingham offices for your appeal hearing, unless specifically advised to do so).

You may attend the appeal personally *online* and bring a friend/representative with you to assist in the presentation of your case. If you are unable to attend, or do not wish to, the appeal may be heard on the basis of the written evidence.

Do you have access to Zoom video-conferencing? Yes / No

You are entitled to 10 school days' notice of the appeal hearing date but you can agree to less notice so that your appeal may be heard earlier. Do you agree to accept less than 10 school days' notice of the appeal hearing date? Yes / No

Will you come to the appeal? Yes / No

Will you bring someone with you? Yes / No
If you have said yes, *please state their **name** and **relationship to you*** (*eg parent/friend*):

……..

If attending, will you need a translator? Yes / No
If you have said Yes, please state **which language**: ……..

Will you need any other special arrangements at the hearing? Yes / No
(*eg access requirements/hearing loop/sign language*)

If you have said Yes, please state what you will need:

……

<u>Your details</u>:

[*Title*] Dr/ Mr/ Mrs/ Ms/ other ……..

[*Please **write or type your full name <u>clearly in capital letters</u>***]

……

Please state your Relationship to the child (eg mother/father/legal guardian):

……

I wish to appeal against the refusal of a place for the child in **Year Group** ……

at [***name of school***] .....
Please find here the link to the Birmingham Diocesan Board of Finance Privacy Notice which informs you how your personal data will be handled during the course of your appeal: https://www.cofebirmingham.com/privacy-notice **Parent/guardian signature**: ..... Date: .....

Please return this form to the Chair of the Local Academy Board/Chair of Governors at the school address above.

Sept 2024 v1