

## ADMISSION TO PRIMARY / SECONDARY SCHOOL APPEAL FORM

*(Please refer to the School Admission web pages at [www.stockton.gov.uk/schooladmissions](http://www.stockton.gov.uk/schooladmissions) for further information regarding admission appeals).*

*Please note that a separate appeal form must be completed for each school in which you are appealing for a place.*

**Please return within 20 days of receipt of this form**

### Section 1 – Child's Details

Name of Child: .....

Gender: .....

Date of Birth: .....

Full Name of Parent(s) or Carer(s): .....

Year Group: ..... Current school: .....

Address where child usually lives:  
.....  
.....

### Section 2 - Your Details

Full Name: .....

Relationship to Child: .....

Address (if different from child's address in Section 1): .....

Contact telephone numbers: .....

If you are appealing for a place in Reception or Year 7 please state the School at which an alternative place has been offered: .....

**Section 3 – Other adults with parental responsibility for the Child.**

Full Name: .....

Relationship to Child: .....

Address (if different from child's address in Section 1): .....

.....

.....

Contact telephone numbers: .....

**IMPORTANT - Please tick the option that is applicable to your appeal**

**Option A:** I confirm that the person/s named in Section 3 is/are aware of this appeal. I give my consent to any information relating to this appeal to be shared with the person/s named in Section 3.

**OR**

**Option B:** I confirm that the person/s named in Section 3 is/are **NOT** aware of this appeal. **I DO NOT** give my consent to any of information relating to this application being shared with the person/s named in Section 3, unless there is a legal obligation placed upon the Local Authority to do so.

**If you have ticked Option B please state reasons (e.g. domestic violence; Court order) and attach copies of any relevant supporting documentation.**

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**Section 4 – The School you are Appealing for**

PLEASE STATE THE NAME OF THE SCHOOL YOUR APPEAL RELATES TO:

.....

**Section 5 - Appeal Hearing**

Please tick as appropriate: I/We intend      do not intend      to be present at the Appeal Hearing.

**Please note:** If you are unable to attend the arranged hearing date then the appeal will be heard in your absence and the Panel will take into consideration your appeal form and any other evidence that has been provided by you prior to the hearing.

## Section 6 – Declaration

If my appeal relates to a school that acts as its own Admissions Authority i.e. an Academy, Voluntary-Aided or Free School, I understand that this form will be sent to that school.

Parent/Guardian: I the undersigned hereby declare that I have parental responsibility for the child named in Section 1 and confirm that all persons with parental responsibility have been consulted and agree to this appeal (unless I have provided reasons under Section 3)

**Signature:** ..... **Print Name:** .....

**Date:** .....

## Section 7 – Important Information

*Additional information for Reception, Year 1 and Year 2 (Key stage 1) appeals*

*By law, infant classes must not have more than 30 children except in very limited exceptions. This means it is very difficult to be successful at an appeal hearing and personal circumstances such as home to school distance, children arrangements, transport issues or having children at other schools are highly unlikely to be sufficient reasons to make an appeal successful.*

*An appeal can only be successful if one or more of the following circumstances apply:*

*If the admission of the child would not increase the class size limit over 30;*

*If the admission arrangements do not comply with the law;*

*If the admission arrangements were incorrectly applied;*

*If the decision to refuse admission was unreasonable (completely perverse and outrageous) in light of the admission arrangement*

*Additional Information for Key Stage 2 and above*

*By law an appeal for a school place in Key Stage 2 and above can only be successful if the following circumstances apply. You are advised to consider carefully whether your case falls within the grounds.*

- 1. Whether the admissions arrangements complied with the law*
- 2. Whether the admission arrangements were applied correctly and fairly in the case of your child*
- 3. Whether or not admitting an extra child would adversely impact on the provision of education at the school*

## Section 8 - GROUNDS FOR APPEAL

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Please state the reasons why you believe that your child should attend your preferred school.

You should try to explain what the preferred school can offer your child that no other school in Stockton can offer.

If your case relates to your child's medical or additional needs and you have documentation from professionals to support this, please attach this to the form or forward it to the address overleaf as soon as possible.

Please continue overleaf if necessary.

Once completed, this form should be sent to:

**Appeals Administrator, Corporate Administration Service, Stockton-on-Tees Borough Council, PO Box 11, Municipal Buildings, Church Road, Stockton-on-Tees, TS18 1LD**

Completed appeal forms can also be emailed to the Appeals Administrator using:

[Admissions.Appeals@stockton.gov.uk](mailto:Admissions.Appeals@stockton.gov.uk)

**Contact numbers:**

**Corporate Administration Service (appeal organisation & administration): (01642) 528228**

**School Admissions: (01642) 526605**