**Admission Appeal Application Form**

*Please type only within the text boxes. If needed, continue on a separate sheet of paper and attach it to this document.*

You have been refused a place for your child at **Halewood Academy**

You have a right of appeal against this decision. If you decide to appeal, please complete this form and return it to the address shown on page 3. Further information on the appeals processes will be circulated to all appellants.

Please note that if your child has a Statement of Special Educational Needs (SEN) or an Education and Health Care Plan (EHCP), the appeal procedures are different. Please see the footnote on page 3 of this form for further information

**Pupil Details**

|  |  |
| --- | --- |
| Forename(s): | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Surname: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Date of birth: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Gender: | [ ]  Male [ ]  Female |

|  |  |
| --- | --- |
| Address: | Click or tap here to enter text. |
|  | Click or tap here to enter text. |
|  | Click or tap here to enter text. |
|  | Postcode: Click or tap here to enter text. |

|  |  |
| --- | --- |
| Telephone (home): | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Name of current school: | Click or tap here to enter text. |

Reasons for appeal\*:

|  |
| --- |
| Click or tap here to enter text. |

*\*If you wish to state that you believe your child has been refused a place on the grounds of unjustifiable discrimination linked to a disability, please make this clear in your reasons.*

*You may attach additional sheets/evidence. Please ensure they have your child’s name at the top and attach firmly to this sheet. Your appeal must be submitted within the same academic year of your application being refused.*

**Details of the person making this appeal**

|  |  |
| --- | --- |
| Parent/Carer name: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Address: | Click or tap here to enter text. |
|  | Click or tap here to enter text. |
|  | Click or tap here to enter text. |
|  | Postcode: Click or tap here to enter text. |

|  |  |
| --- | --- |
| Daytime telephone: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Email address: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Relationship to pupil:  | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Do you intend to attend the appeal? (Yes/No):  | [ ]  Yes [ ]  No |

|  |  |
| --- | --- |
| Do you require an interpreter? (Yes/No): | [ ]  Yes [ ]  No |
| *If yes, please specify language (including dialect):* | Click or tap here to enter text. |

If you intend to have a representative at the appeal, please give his/her details here. You will be sent an extra copy of the papers for your representative.

|  |  |
| --- | --- |
| I will be represented by:  | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Status of representative (e.g. friend/relative): | Click or tap here to enter text. |

**Alternative Offers**

Have you been offered a place at another school? If so, please state the school name here:

|  |  |
| --- | --- |
| School name: | Click or tap here to enter text. |

**Declaration**

[ ]  I certify that all the information given above is correct.

[ ]  I am aware that if I do not attend the hearing, it will take place in my absence using the information available.

|  |  |
| --- | --- |
| Signed: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Print: | Click or tap here to enter text. |

|  |  |
| --- | --- |
| Date: | Click or tap to enter a date. |

Please return the completed form to the school by email or by post

Email: admin@halewoodacademy.co.uk

Post:

Halewood Academy

The Avenue

Wood Road

Liverpool

L26 1UU

If you wish to appeal against the Local Education Authority’s decision regarding a Statement of Special Educational Needs (SEN) or an Education Health & Care Plan (EHCP) for your child the admission appeal procedure is different. Your appeal should be directed to the First-tier Tribunal (Special Educational Needs & Disability). Further information can be found on the their website: <https://www.gov.uk/courts-tribunals/first-tier-tribunal-special-educational-needs-and-disability>

However, if your child has special educational needs, but does not have a Statement or Education Health and Care Plan (EHC), the appeal will be considered by an Independent Appeal Panel appointed to hear appeals against non-admission to the Academy.