

SHROPSHIRE COUNCIL
APPEAL AGAINST ALLOCATION TO EDUCATION IN SHROPSHIRE

Please complete this form in **CAPITAL LETTERS** and return to:
The Admissions Team, Learning & Skills,
Shirehall, Abbey Foregate, Shrewsbury. SY2 6ND.

1. Full name of child:
FIRST NAME SURNAME

2. Date of Birth: - (DD/MM/YY): 3. Gender: Male Female
(Please circle the appropriate response)

4. Name of Parent/Carer - (Mr/Mrs/Miss/Ms):
.....

5. Present family address:
..... Post Code:
If moving into area - please state new address:
..... Post Code:

(Please also enclose your solicitor's letter confirming purchase/completion date of your new property or a copy of rental agreement along with confirmation where applicable that your previous property has been sold .)

6. Contact telephone number(s) with full code(s): Home:
Work: Mobile:
Email address:.....

7. School presently attending:
OR School last attended:
Date attendance ceased:

8a. Does your child have a EHCP? **Yes No**
(Please circle the appropriate response)

If **Yes**, please give Education Authority which has provided that EHCP:

8b. Is your child in public care as a Looked After Child or previously Looked After? **Yes No**
(Please circle the appropriate response)

9. School(s) preferred: 1st
(You may appeal for 2nd
more than one school) 3rd

Does your child have a sibling attending any of the preferred schools? **Yes No**
(Please circle the appropriate response)

If so, please give details

10. Appeal hearings may take up to 40 school days to arrange. The Clerk to the Appeal Panel is normally obliged to give parents/carers 10 school days' notice of the date of an appeal hearing. If parents/carers are prepared to waive the normal period of notice, it **may** be possible to arrange an earlier appeal. Please note that Appeals take place in term time only.

Do you wish to waive the normal 10 school days' notice period? **Yes No**
(Please circle the appropriate response)

At a later date the Clerk to the Appeal Panel, will send you a notice of the Appeal Panel's hearing, together with a copy of the Authority's response. At that stage you will be asked whether you wish to attend the hearing, with or without a representative. You will be able to submit additional information to the panel up to 6 working days before the hearing.

Please state below clearly your reasons for this appeal.

(If you require further space, please continue on a separate piece of paper)

Signature of Parent/Carer:

Date:

Information on this statement may be shared with your child's previous school and school which is being requested.