

## ROTHERHAM METROPOLITAN BOROUGH COUNCIL LOCAL AUTHORITY

### NOTICE OF APPEAL FOR ADMISSION TO SCHOOL

If parents/carers wish to appeal against the decision of the Authority in the case of Community and Controlled schools and the Governing Body in the case of Voluntary Aided Schools and Academies they must do so in writing. Parents/carers wishing to exercise this right may use this form. **The reasons why a place at the school is preferred should be provided on the back of this form.**

#### Child's details

Name of Child (in whose name the appeal is made)	
Date of Birth	
Address	
Postcode	
Present School/Academy or Nursery/Pre-School Provider	
Allocated School/Academy	
School/Academy Preferred	

If your address has changed since you completed the Common Application Form you will need to provide **proof of your new address.**

#### Parent Details

Name		
Telephone number		
Email address		
Do you wish to receive your appeal information via Email?	Yes / No	
Appeals are heard via the following options: Please tick your preference in the box on the right.	Video conference (MS Teams)	
	Face to face (in person at the Town Hall)	
	Telephone conference	

**PLEASE GIVE YOUR REASONS FOR THIS APPEAL WITH SUPPORTING INFORMATION, BELOW.**

(Continue on a separate sheet if necessary)

**Declaration**

I declare that all the information I have given on this form is correct and true and constitutes the reasons for this appeal. I declare that I have parental responsibility for all children named on this form and wish to appeal against the decision of the Admissions Authority(ies) not to allocate a place(s) at the preferred school(s)/academy/(ies) for my child/ren. I confirm that all other persons with parental responsibility have been contacted and have agreed to this appeal being submitted. I confirm that to the best of my knowledge, there are no applications before the Courts by a person with or seeking parental responsibility disputing the child's residence or which school they attend. I confirm that I have read and understood the information relating to GDPR and data sharing.

**Signed:**

**Date:**

**Full Name (in block capitals):**

**(Mr./Mrs./Miss/Ms./Other)**

**Relationship to child:**

**If you require an interpreter at the appeal hearing, please state the language required:**

This completed Appeal Form should be emailed to [SchoolAppeals@rotherham.gov.uk](mailto:SchoolAppeals@rotherham.gov.uk) or posted to:-  
The School Appeals Officer, Democratic Services, Town Hall, The Crofts, Moorgate Street, Rotherham. S60 2TH