



Headteacher: Mr Russell Brentnall

NOTICE OF APPEAL AGAINST A DECISION NOT TO OFFER A PLACE AT THE SCHOOL OF PARENTS' PREFERENCE

I wish to appeal against the decision not to offer my child a place at **West Blatchington Primary and Nursery School**.

1 Child's name (in CAPITAL LETTERS please):

Surname First name:

Date of birth:

2 Home address:

.....

..... Post Code:

3 Contact telephone number(s)

Home: Other:

4 To assist in arranging a date convenient for you, please give any dates when you are not available:

.....

5 Do you require an interpreter? YES/NO
If YES, which language?

There are only three grounds on which appeals to West Blatchington Primary and Nursery School may be considered. Please indicate below which of these grounds you believe applies in your case

6 The reasons for my appeal are:
(Please delete as appropriate and continue on separate sheets if necessary)

a) That the admission of my child would not breach the Infant class size limit

.....
.....
.....
.....
.....

b) That a place would have been offered if the admission arrangements had complied with admissions law or had been correctly and impartially applied.

For your appeal to succeed on this ground, you will have to show that the normal admission arrangements were not properly followed and if they had, you child would have been offered a place. (In the space below, please give details of why you think the procedures were not properly implemented)

.....

.....

.....

.....

.....

.....

c) That the decision not to admit your child was not one which a reasonable Admission Authority would make in the circumstances of the case.

My reasons for saying this are:

.....

.....

.....

.....

.....

.....

.....

Signed: Date:
(mother/father/legal guardian/carer)

Title: Mr/Mrs/Miss/Ms Name:

Please return the completed form to:
West Blatchington Primary and Nursery School
Hangleton Way
Hove
BN3 8BN
admin@wblatch.brighton-hove.sch.uk