

## Nottinghamshire APPEAL AGAINST AN ADMISSION DECISION County Council

## IMPORTANT: PLEASE COMPLETE IN BLACK INK

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PREFERRED SC	HOOL								
REQUESTED DATE OF ADMISS		ISSION							
PUPIL'S DETAILS	S			_					
PUPIL'S SURNAME		DATE OF BIR			OF BIRTH	DAY	MONTH	YEAR	
PUPIL'S FIRST NAME(S)						MALE / FEMALE*			
PUPIL'S HOME ADDRESS		POSTCODE							
PRESENT SCHOOL			, , , ,						
PARENT/GUARD	IAN'S DETA	ILS						i	
TITLE FIRST NAME			SURNAME						
RELATIONSHIP TO CHILD									
HOME ADDRESS (IF DIFFERENT FROM CHILD'S - We'll use this address to write to you if different to child's address)		POSTCODE							
HOME <b></b>		WORK 2				MOBILE 2			
EMAIL ADDRESS									
DO YOU WAIVE YOUR RIGHT TO 10 DAYS' NOTICE? YES/NO*  If you waive your right to 10 school days' notice this may mean we are able to hear your appeal earlier. Legally, you should receive 10 school days' notice of your appeal date, unless you choose to waive that right.  DO YOU WISH TO BE PRESENT AT THE HEARING? YES/NO*  WHAT IS YOUR PREFERRED WAY OF ATTENDING THE HEARING?  (face-to-face at County Hall, West Bridgford/video call using Microsoft Teams/not attending)									
			IS THAT WOULD AL	SO BE SUITA	ABLE FOR	R YOU	?		
(tick appropriate		•	defend \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Lucios Miss.	.a# Tas	<u> </u>	Not -44.	a ali:	
Face to face at County Hall. West Bridgford   Video call using Microsoft Teams   Not attending									

•	Please state if you have a preference on the time of day:- morning / afternoon	
•	Dates unavailable(Although every effort will be made, it may not be possible to comply)	
•	Will you be accompanied by a friend, supporter or professional representative? Will you require the services of an interpreter? YES/NO*	YES/NO*
•	If yes, please tell us which language you require?	(*Delete as appropriate
	REASONS FOR APPEAL	
(Co	ontinue on a separate sheet if necessary)	
Da	ate Signature	
(1)	This form should be fully completed and sent by post to Democratic Services, N County Council, County Hall, West Bridgford, Nottingham, NG2 7QP, or by emai	

(2) This appeal form will be acknowledged on receipt. If you do not receive any letter within 2 weeks, please contact the Education Appeals Team on 0300 500 80 80.

education.appeals@nottscc.gov.uk. Remember to attach any supporting information you have.