

**ST LAURENCE SCHOOL  
APPEAL APPLICATION FORM**

Please return your completed form to: Sally Hackett, St Laurence School, Ashley Road, BRADFORD ON AVON, Wiltshire, BA15 1DZ. or email to [salhac@st-laurence.com](mailto:salhac@st-laurence.com) before the deadline of **Friday 19th April 2024**.

**PLEASE GIVE DETAILS**

I wish to appeal against the decision to refuse admission for my child to St Laurence School

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| --- | --- | --- |
| Pupil’s name |  | Current School Year: |
| Date of birth |  |  |
|  |  | Year Group appealing for: |
| Parent(s) name(s) |  | |
| Address & post code  (This should be the child’s main address) |  | |
| Contact Tel Numbers  & email addresses |  | |
| Name of current school |  | |
| |  | | --- | | ***Declaration and Signature of Parent/Carer*** |  * I wish to exercise my right of appeal under the School Standards and Framework Act of 1998 for a place at the above school, as I have been refused a place at this school. * I certify that I am the person with parental responsibility for the child named above and that the information given is true to the best of my knowledge and belief. * I understand that if I do not attend the hearing and I do not send a family representative my appeal will be heard in my absence using the information I have supplied on this form along with any other information I have submitted before my hearing date. * I understand that any false or deliberately misleading information given on this form and/or supporting information may render this appeal invalid, or lead to the offer of a place being withdrawn and may result in legal action being taken.  |  |  |  |  | | --- | --- | --- | --- | | **Parent’s/Carer’s Signature** |  | **Date:** |  |   Information supplied will be used for registered purposes under the Data Protection Act 1998.  **Checklist:**  Before returning this form, please ensure that you have:  Read the accompanying notes.  Completed all relevant sections of this form.  Attached any additional information.  Completed forms must be returned to the address at the top of this form. | | |
| ***Reasons for my appeal (please continue on a separate sheet if necessary).*** | | |