



## School Admission Appeal

Please return this form to: [info@hackwood.theharmonytrust.org](mailto:info@hackwood.theharmonytrust.org)

Please read the guidance notes before completing this form. Please use CAPITAL LETTERS and complete the form in BLACK ink.

### CHILD DETAILS

Child's name

Date of Birth

Address

Gender

### PARENT/CARER DETAILS

Full name of Parent/Guardian \_\_\_\_\_ Mr/Mrs/Miss/Ms

### Telephone Numbers

Day: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

Will you require an interpreter at the appeal hearing?

Yes ☐

No ☐

**Optional**, If you require an interpreter, please state which language: \_\_\_\_\_

Child's present school:

Name of your preferred school:

Please provide details below of any other brothers and sisters in the family:

Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_ Current School \_\_\_\_\_

Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_ Current School \_\_\_\_\_

Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_ Current School \_\_\_\_\_

Child's name \_\_\_\_\_ Date of birth \_\_\_\_\_ Current School \_\_\_\_\_

Please write below all of the reasons for your appeal. If you have any documentation to support your reasons (for example medical letters), please attached them to your appeal.

**Declaration:**

I confirm that the above named child is permanently resident at the address stated

I certify that the information given by me on this form is complete and true and I understand that the Local Authority will take such steps as they consider necessary to verify any information. This may mean contacting the child's present or previous school.

SIGNED:

PRINT:



**How is your information used?**

The information that we collect will be used primarily so that we can allocate School Places to our Children and Young People; but also to ensure that Children, Young People and their Families are receiving any necessary support in order to maintain their school place, and ensure that any barriers to learning are removed or minimised. Information may also be used to identify families with multiple and complex needs under the National Troubled Families Programme, ensure they are receiving the most appropriate services and monitor the effectiveness of these services.

**Who will your information be shared with?**

The information that you provide may be shared with other departments in the Council (such as Educational Welfare, Children's Social Care and/or Early Help Service, Vulnerable Learners Service, Inclusion Service, Family Information Service, SENDIASS, New Communities Support, Democratic Services, Youth Support Services and Business Intelligence). This is so that we can support, and safeguard our Children and Young People. Your information will be shared with schools in order to allocate places, and with the NHS, so that a School Nurse can be allocated. Your information will also be shared with the Department for Education (DfE), the Ministry for Housing, Communities and Local Government (MHCLG) and Ofsted, because we have a Legal duty to do so.

For further information about how your personal information will be used, please visit [www.derby.gov.uk](http://www.derby.gov.uk) where you can see a full copy of our Privacy Notice. Alternatively you can request a hard copy from the Admissions Service by telephoning 01332 642730 or emailing [Admissions@derby.gov.uk](mailto:Admissions@derby.gov.uk)