

Academy Way, Gretton Road, Corby, Northamptonshire, NN17 5EB t 01536 303120 e Fern.Gibson@corbybusinesssacademy.org

## **Appeal Application Form In Year Appeals**

## Notes for completion:

- Please complete Pages 1 and 2 in capital letters using black ink or type-written.
- Please ensure the form is returned as soon as possible.
- The date of the appeal will be notified to you in writing.

Full Name of Student							
Please Indicate Year Group Admission (Please tick as appropriate)	Year 7	Year 8	Year 9	Year 10	Year 11	Year 12	Year 13
Date of Birth			male	Male			
Address of Student							
Name of Parent/Carer			т	itle			
Address of Parent / Carer (if different from above)							
Contact Telephone Numbers	Day			Eveni	ng		
Email Address							

## This appeal form should be returned to:

<u>Fern.Gibson@corbybusinessacademy.org</u> or Fern Gibson, Corby Business Academy, Academy Way, Gretton Road, Corby, Northamptonshire, NN17 5EB.

Grounds For Appeal (to be complete	ed by Parent / Carer)			
If necessary, please continue on a se	parate sheet and attach any supporting evidence to this f	orm.		
Signature (Parent / Carer)				
Date of Submission of Appeal				
Year 7 & Year 12 only – If the appea List held until 31st December	l is NOT upheld please place student on the Waiting	Yes	No	
Please indicate if you intend to be pr	esent at the Appeal	Yes	No	
Please indicate if you require Disable	ed Access	Yes	No	
Please indicate if you require the fac	ilities of a Language / Sign Interpreter	Yes	No	
Please state requirements				
Dated: Sig	nature of Parent/Carer:			

For Office Use Only														
Date Appeal Form sent to Parent / Carer														
Date Appeal Form Received														
Year Group Admission	Year 7 Year 8 Yea			ar 9	Year 10 Year 1			.1 Year 12			Year 13			
(Please tick as appropriate)														
Name of Student								Date c	of Birth					
Student Number		Tested (Y/N) Year 7 only Stanine						e						
Date of Appeal								Time						
Appeal Upheld	Yes		No	No Appeal Dec				ned		Yes			No	
Place on waiting list Year 7 and 12 (until 31 <sup>st</sup> Dec)	Yes		No			Atten	ding Ap	peal		Yes			No	
LA School Allocation														
Disabled Access required	Yes		No			Pleas	e State:							
Sign/Lang Interpreter required	Yes		No	No			Please State:							
Clerk to the Appeals Panel Signature														
Date Parent / Carer informed of decision														
Comments														