



New Intake Appeal Application Form - September 2020 entry

Notes for completion:

- Please complete in **capital letters using black ink or type-written.**
- Please ensure the form is returned by **Monday 30th March 2020.**
- Any appeal applications received after **Monday 30th March 2020** may not be heard with the other appeals.
- The date of the appeal will be notified to you in writing by **Friday 1st May 2020.**

Full Name of Student			
Date of Birth		Gender	
Address of Student			
Name of Parent / Carer			
Address of Parent / Carer (if different from above)			
Contact Telephone Numbers	Day		Evening
Email Address			

This appeal form should be returned to:

Fern.Gibson@corbybusinessacademy.org or Fern Gibson, Corby Business Academy, Academy Way, Gretton Road, Corby, Northamptonshire, NN15 5EB

The deadline for receipt of the completed form is no later than **5.00 p.m. on Monday 30th March 2020.**

Please note that additional evidence to that submitted on this form regarding the grounds for appeal can be submitted by parents / carers to Fern Gibson at the above Academy address. The deadline for submission of additional evidence for the grounds for appeal is **Monday 11th May 2020.**

Grounds for Appeals (to be completed by Parent / Carer)

If necessary, please continue on a separate sheet and attach any supporting evidence to this form.

Number of additional sheets provided

Signature (Parent / Carer)

Date of Submission of Appeal

Please place student on the Waiting List if the appeal is NOT upheld (only applicable until 31st December of the year of entry)

Yes

No

Please indicate if you intend to be present at the Appeal or will have a representative with you or representing you

Yes

No

Please indicate if you intend to have a representative with you or representing you

Yes

No

Please indicate if you require disabled access

Yes

No

Please indicate if you require the facilities of a language / sign Interpreter

Yes

No

Please state requirements.

For Office Use Only

Date Appeal Form sent to Parent / Carer										
Date Appeal Form Received										
Name of Student					Date of Birth					
Student Number					Tested (Y/N)		Stanine			
Date of Appeal					Time					
Appeal Upheld	Yes		No		Appeal Declined	Yes		No		
Place on waiting list (until 31 st Dec)	Yes		No		Attending Appeal	Yes		No		
LA School Allocation										
Disabled Access required	Yes		No		Please State:					
Sign/Lang Interpreter required	Yes		No		Please State:					
Clerk to the Appeals Panel Signature										
Date Parent / Carer informed of decision										

Comments