

Chatsworth Infant School



NOTICE OF APPEAL AGAINST A DECISION NOT TO OFFER A PLACE AT THE SCHOOL OF PARENTS' PREFERENCE

I wish to appeal against the decision not to offer my child a place at Chatsworth Infant School

1	Child's name (in CAPITAL LETTERS please):
	Surname
	First name:
	Date of birth:
2	Home address:
	Post Code:
3	Contact telephone number(s)
	Home:
	Other:
4	To assist in arranging a date convenient for you, please give any dates when you are
•	not available:
5	Do you require an interpreter? YES/NO
	If YES, which language?



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There are only three grounds on which appeals to Chatsworth Infant School may be considered. Please indicate below which of these grounds you believe applies in your case

6	The reasons for my appeal are:			
	(Please delete as appropriate and continue on separate sheets if necessary)			
a)	That the admission of my child would not breach the Infant class size limit			
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b) admiss	That a place would have been offered if the admission arrangements had complied with sions law or had been correctly and impartially applied.			
arrang a place	our appeal to succeed on this ground, you will have to show that the normal admission gements were not properly followed and if they had, you child would have been offered e. (In the space below, please give details of why you think the procedures were not by implemented)			
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Authority would make in the circumstances of the case.			
My re	asons for saying this are:		
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Signe	d:	Date:	
J	(mother/father/legal guardian/c		
Title:	Mr/Mrs/Miss/Ms	Name:	
Dlagge	a vature that compulated forms to		
	e return the completed form to:		
	worth Infant School		
	Oak Lane		
Sidcu	0		
Kent			
DA15	9DD		
admir	n@chatsworth.bexley.sch.uk		