

**INDEPENDENT ADMISSION APPEALS PANEL**  
**Church of England Schools and Academies in Coventry Diocese**

**APPEALS FORM FOR \_\_\_\_\_ SCHOOL**

This form is to be used for the right of independent appeal against the decision of the governing body regarding the refusal of a place at the school. Please complete the following details:

Date \_\_\_\_\_ School \_\_\_\_\_

Surname of child \_\_\_\_\_

First name of child \_\_\_\_\_ Boy/Girl \_\_\_\_\_

Date of birth \_\_\_\_\_

Name of appellant (person appealing on behalf of the child) \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

Please indicate the entry date and year group you are seeking:

Immediate entry       September entry       Year group \_\_\_\_\_

Name of school currently attended \_\_\_\_\_

Please give dates and school names of any and all exclusions \_\_\_\_\_

\_\_\_\_\_

Instructions to appellants:

- Complete the attached sheet stating the grounds for your appeal – please continue on separate sheets if necessary.
- Please sign and date the bottom of each sheet
- Return the form with any supporting documentation (including medical evidence) to:

Clerk to the Independent Appeals Panel  
Benn Education Centre, Claremont Road (main entrance on Craven Road)  
Rugby  
CV21 3LU  
Email: joanne.evans@covcofe.org      Tel: 01788 422800

Please give details stating the grounds for your appeal – please continue on separate sheets if necessary

Signed \_\_\_\_\_ Date \_\_\_\_\_