

**ADMISSIONS POLICY 2019/20 CONSULTATION RESPONSE FORM  
CARMEL COLLEGE VI FORM**

**Do you agree to the policy for 2019/20?**

Strongly agree	Agree	Unsure	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please give any comments below:**

**Are you? (please tick and use the space provided to state which school you are from):**

A parent/carer of a pupil .....

Staff member of a school/academy .....

Pupil .....

Governor .....

**Other representative: (please tick and use the space provided to state which organisation you are from):**

Diocesan representative .....

Union .....

Voluntary Sector representative .....

Other .....

**If you wish to let us know your name and address please complete your details below:**

**Name:** .....

**Address:** .....

**This response form should be returned to the address below by no later than 22 January 2018.**

Thank you for your views.

If you wish to post your response, please return to:

Julian Kenshole  
Carmel College  
The Headlands  
Darlington  
DL3 8RW

**E Mail:** Jkenshole@carmel.org.uk  
**Fax no:** 01325 254335