



Application for Admission to Lower School (Class 1 – 7/8)

Please make sure you have read and understood our Admissions Process before completing and submitting this form. *Although we hope that children can enjoy their entire education here, progression from Lower School to Upper School (Class 8/9) is not automatic and an admissions process takes place at each stage.*

Child's Details

Child's full name _____ Date of Birth _____

Gender Status (Male/Female/Non-Binary) please specify: _____

Nationality _____ Ethnicity _____

Is English an additional language for your child? Yes [] No [] Main language used at home? _____

Does the child have 'Looked After Child' status? Yes [] No []
(placed with foster carers, in a residential home, looked after by the local authority or under any other circumstances)

Preferred start date _____

How long do you want your child to attend Cardiff Steiner School? Please include reasons (e.g. until aged 18 etc.)

Parents/Guardians

Parents/Guardians 1 full name/s _____

Relationship to child _____

Address _____

Postcode _____ Home Telephone _____

Mobile number _____ Email _____

Parents/Guardians 2 full name/s _____

Relationship to child _____

Address _____

Postcode _____ Home Telephone _____

Mobile number _____ Email _____

If you are living separately please say who the child generally lives with and who will be responsible for paying fees:

Other family details - Please give details of any other children currently living at your child's home(s)

Children's names	Date of birth	Male /Female	School attending

Educational History

Name and address of child's present school with start date:

We will contact teachers at your child's present school. If for any reason you don't want us to, please tell us below.

Name and address of previous schools including nursery/kindergartens with dates. Continue on a separate sheet if necessary)

Please provide us with copies of the last two years' reports by previous schools, nurseries or other education settings:

No reports have been made on my child

OR

I am including copies of reports

OR

I will send on copies of reports. Please specify when you expect to send these and the reason for any delay:

Health & Educational Needs

Does the applicant have a registered disability? Yes [] No []

If yes, please give a brief summary here and provide full details on a separate sheet, along with any reports you may have

Does the applicant have a Statement of Special Educational Needs? Yes [] No []

If yes, please give a brief summary here and provide full details on a separate sheet, along with any reports you may have.

Does the applicant have any particular health needs? (e.g. asthma/allergies) Yes [] No []

If yes, please specify.

Is the applicant currently receiving medical treatment? Yes [] No []

If yes, please specify.

Does the applicant have any Additional Learning Needs? (including learning, behavioural or socio/emotional needs)

Yes [] No []

If yes, please give a brief summary here and provide full details on a separate sheet **including any additional support for this that your child has received, or is currently receiving, from School or other services**, along with any reports you may have.

Has the applicant ever been referred to a child/educational psychologist or other educational/ development consultant?

Yes [] No []

If yes, please specify

Please provide us with copies of all reports from any child/educational psychologist or any other educational/ development consultant regarding the applicant

No reports have been made

OR

I am including copies of reports

OR

I will send on copies of reports. Please specify when you expect to send these and the reason for any delay:

General health of the applicant. Please give details of any specific health problems, past or present not covered above.
(Continue on a separate sheet if necessary)

Activities (including hobbies, sports, etc.) currently enjoyed by the applicant

How did you first hear about the Cardiff Steiner School?

Tick all that apply

Leaflet picked up (from where) _____

Advert (in what) _____

Website (which one) _____

Leaflet through post

Poster

General word of mouth

Newspaper listing/editorial

TV/Radio

Recommendation from someone who attends

Other (please state) _____

Have you visited the School? If yes, when? _____

The information given on this form will be held by Cardiff Steiner School. Apart from using this information for statutory returns and for research purposes, all information will be held in the strictest confidence under the requirements of the Data Protection Act 2018.

I note the above statement and believe the information provided in this form to be correct as of this date. If my child enrolls at the School I will inform the school of any changes that may occur whilst my child attends the School.

I understand that in matters relating to admissions to Cardiff Steiner School, the decision of the College of Teachers is final.

Signature of *all* parents/guardians you have provided are required:

Signature of Parent/Guardian _____ Date _____

Signature of Parent/Guardian _____ Date _____

To complete your Application for Admission please ensure you complete the section overleaf.

Thank you.

Please return this form to Nicola Robinson, Admissions, Cardiff Steiner School, Hawthorn Road West, Llandaff North, Cardiff, CF14 2FL. Please mark the envelope **PRIVATE & CONFIDENTIAL**.

Application for Admission

Please tell us your reasons for choosing a Steiner education for your child. Feel free to include any information that will help complete our picture of your child. Please submit this page with your child's completed application.