

Child's Details

Application for Admission to Kindergarten (age 3 to 6)

Please make sure you have read and understood our Admissions Pack before completing and submitting this form. Although we hope that children can enjoy their entire education here, progression from Kindergarten to Lower School (Class 1) and from Lower School to Upper School (Class 8/9) is not automatic and an admissions process takes place at each stage.

Child's full name		Date of	Birth	
GenderNa	tionality	Ethnicity		
Is English an additional language for your child? (Y/N)		Main language used at home?		
Does the child have 'Looked Aft (placed with foster carers, in a r		 after by the local authority or under any	other circumstances)	
Preferred start date				
Number of days/times per wee	k and which days preferre	ed		
How long do you want your child to attend Cardiff Steiner School? Please include reasons (e.g. until aged 6 or 18 etc.)				
L				
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			·	
<u></u>	Postcode	Home Telephone		
Mobile number		Email		
If you are living separately plea	ase say who the child gen	erally lives with and who will be respo	nsible for paying fees:	

Children's names	Date of birth	Male /Female	School attending
	vo History /if and	licable\	
Educational/Childca	re History (if app	licable)	
Name and address of child's pre	esent school/early years se	tting with start da	ate:
Ve will contact teachers at your	child's present school/sett	ing. If for any reas	on you do not want us to, please tell us below.
We will contact teachers at your	child's present school/sett	ing. If for any reas	on you do not want us to, please tell us below.
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Name and address of previous			rtens with dates. Continue on a separate sheet
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Name and address of previous necessary)	schools/settings including	nursery/kinderga	rtens with dates. Continue on a separate sheet
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Name and address of previous necessary) Please provide us with coperate specialists as follows:	ies of all reports by pr	nursery/kinderga	rtens with dates. Continue on a separate sheet
Please provide us with cop specialists as follows: 1 No reports have been manual or special s	ies of all reports by prade on my child	nursery/kinderga	rtens with dates. Continue on a separate sheet
Please provide us with copspecialists as follows: Name and address of previous previous of previous previous of p	ies of all reports by prade on my child	nursery/kinderga	rtens with dates. Continue on a separate sheet
Please provide us with copspecialists as follows: [] No reports have been management of the copies	ies of all reports by prade on my child	nursery/kinderga	

Doctor, health care & other specific arrangements:				
Name of Doctor				
Surgery Address				
	Postcode			
Telephone	Email			
General health of your child. Plea additional support for learning th behavioural needs. (Continue on	se give details of any specific health problems, past or present. Please include any at your child has received or is currently receiving, and any other special learning or a separate sheet if necessary)			
	of Special Educational Needs? Yes [] No [] y here and provide full details on a separate sheet, along with any reports you may have			

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 attended an Open Day/Visi	t Morning? If yes, when?			
	m will be held by Cardiff Steiner School. Apart from using this information for a purposes, all information will be held in the strictest confidence under the ion Act 1998.			
I note the above statement and believe the information provided in this form to be correct as of this date. 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 School is final.				
Signature of both parents/guardians you have provided are required:				

Thank you.

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

Signature of Parent/Guardian ______ Date ______

Signature of Parent/Guardian ______ Date _____

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 competed application.