



For Office Use Only	Date Received	Application Fee	Stage Applied for	Entry Year	Reports
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Please complete and return this form to the school with an application fee of £60.00. Application fees are paid into our Bursary Fund and are non-refundable. Without this, your application will not be processed.

Payment can be made by cheque, made payable to Edinburgh Steiner School Trust or by BACS:
 Sort Code: 40-52-40 Account Name: Edinburgh Steiner School Trust Bursary Fund
 Account Number: 00090083 Reference: Applicant's Name

Please print clearly using BLOCK CAPITALS, completing all sections.

Section 1 Child's Personal Details

First Name(s)		Last Name		
Preferred Name		Date of Birth	Gender	M F
Address		Preferred start date		
		Days suitable for interview		
		Nationality (if not a UK national)		
	Postcode	Visa required to enter the UK?	Y	N
Native language(s)		Language spoken at home		

Section 2 Parent / Guardian Details

Relationship to child		Relationship to child			
Title	Surname	Title	Surname		
First Name		First Name			
Occupation		Occupation			
Telephone (home)		Telephone (home)			
Telephone (work)		Telephone (work)			
Mobile		Mobile			
Email		Email			
Resident with child?	YES	NO	Resident with child?	YES	NO
Address (if different to child)		Address (if different to child)			
	Postcode		Postcode		

Section 3 Siblings

Name	Date of Birth	Current School

Section 4 Education

Please attach copies of the applicant's most recent school / nursery reports to this application.

Current School/Nursery

Current year group

Name of Teacher/Head

Address

Telephone

Start date

Please complete if applicable. Continue on a separate sheet if necessary.

Previous School/Nursery

Dates attended

Name of Teacher/Head

Address

Reason for leaving

Please sign to give consent to the Edinburgh Steiner School contacting any of the above nurseries/schools to request a verbal or written report for your child, and to authorise his/her current/previous school/nursery to provide this information to the Edinburgh Steiner School.

Signature

Name

If you wish this to be delayed for any reason, please indicate below.

Three horizontal lines for indicating delays.

Section 5 General Health

Please give details of any specific health problems, past or present.

Seven horizontal lines for providing health details.

In the interest of the child, it is important for parents to advise the School of any disability that the applicant has, and of any medical condition or other circumstances which might require him/her to be given special assistance at the School or about which you think we should be aware.

Please give specific details in a separate letter to accompany this form.

Please provide any other details you feel we should know about your child, including any additional support for learning that your child has received or is currently receiving.

Seven horizontal lines for providing additional details.

Section 7 Other Information

How did you first hear about the school? *(Please tick)*

Please give details

From a parent/pupil	<input type="checkbox"/>	
From former pupil	<input type="checkbox"/>	
Web search	<input type="checkbox"/>	
School website	<input type="checkbox"/>	
Social Media	<input type="checkbox"/>	
Publication	<input type="checkbox"/>	
School event	<input type="checkbox"/>	
Other (please specify)	<input type="checkbox"/>	
Have you attended an Open Tour?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
When?		

Section 8 Checklist

Please check and tick to confirm you have completed the following parts of the application form:

- Consent to contact previous school/nursery
- Signatures of all legal guardians
- All contact details of parent/guardians
- All other sections in full

Please tick to confirm you have enclosed all the necessary documents:

- School reports
- Copy of birth certificate/proof of legal guardianship
- Application fee (£60) by cheque or
- Application fee (£60) by BACS

Section 9 Declaration

I confirm that I have given full and accurate information on this application.

I understand that in matters relating to admissions to the Edinburgh Steiner School, the decision of the College of Teachers is final. I understand that my application may be refused at any stage of the admissions process.

Signature of both parents/guardians are required.

Signature	Signature
Date	Date

Thank you for completing this form.

Please return this form to:

Admissions Officer
Edinburgh Steiner School
60 Spylaw Road
Edinburgh EH10 5BR

T: 0131 337 3410

E: admissions@edinburghsteinerschool.org.uk
www.edinburghsteinerschool.org.uk

The General Data Protection Regulation 2018

Edinburgh Steiner School will retain and use the personal details supplied on this form or, in connection with the application strictly in accordance with the The General Data Protection Regulation 2018. This information will be used for the purposes of processing the application, record keeping and internal analysis for advertising or marketing purposes. We shall not use such information for any other purpose without first informing you and obtaining your consent to such new purpose.

Edinburgh Steiner School is a charitable company registered in Scotland (SC 002109).
Registered Office: 6 St Colme Street Edinburgh

Steiner School is a registered collective mark of the Steiner Waldorf Schools Fellowship