

Application Form: Stepping Stones

EASTCOURT INDEPENDENT SCHOOL

1, Eastwood Road, Goodmayes, IG3 8UW

Tel: 020 8590 5472

Pupil's Surname..... Boy/Girl.....

Pupil's Forenames in full.....
(*underline the name by which he/she is known*)

Address.....

Date of Birth..... Admission sought for September

Please show your preference by deleting two of the options below:

- * I prefer the morning session
- * I prefer the afternoon session
- * I have no preference

If your preferred session is full, do you wish to be considered for the alternative? YES/NO*

Please note that participating in the Stepping Stones group guarantees screening but does not automatically reserve children a full-time place at Eastcourt the following September. A separate application must be made.

*I/We hereby apply for the admission to Stepping Stones, Eastcourt Independent School of *my/our *son/daughter/ward, and agree to be bound by the terms of this application and by the Terms of Acceptance attached.

Signed..... Date.....

Signed..... Date.....

(*Delete the words not applicable)