



APPLICATION FORM

1. Personal details:

Family name / surname:	First / given name:
Title (Dr, Ms, Mrs, Mr etc):	Date of Birth:
Gender: Male / Female	Nationality:
Country of Birth:	
Country of permanent residence:	

2. Residence:

Applicants not born in UK please state date of entry:

Details of Visa:

Address details:

Permanent home address:	Address for correspondence (<i>if different from home address</i>):
Postcode:	Postcode:
Country:	Country:
Telephone:	Telephone:
e-mail:	e-mail:

3. Please tell us about why you are interested in taking this course:

4. Referees:

Please give details of 2 referees below. Please forward the **Reference Forms** (also downloadable from website), asking them to forward to:
teacherdevelopment@edinburghsteinerschool.org.uk

We cannot complete your application until we receive these.

Names:	Names:
Position:	Position:
Company /Organisation:	Company / Organisation
Address:	Address:
Postcode:	Postcode:
Country:	Country:
Telephone:	Telephone:
Email:	Email:

5. Declaration:

I confirm that, to the best of my knowledge, the information given in this form is correct and complete.

Signature of applicant:	Date:
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Please return the completed application form to:
teacherdevelopment@edinburghsteinerschool.org.uk

or post to:

**Teacher Development / Adult Education,
Edinburgh Steiner School,
60, Spylaw Road,
Edinburgh,
EH10 5BR**