



# FREIE WALDORFSCHULE

Rudolf-Steiner-Schule Villingen-Schwenningen

Rudolf-Steiner-Schule  
Schluchseestr.55  
78054 Villingen-Schwenningen

07720 855970  
info@waldorfschule-vs.de

## SCHOOL APPLICATION

**Child:**  male  female  other

..... family name	..... first name	..... date of birth
..... place of birth	..... nationality	..... religion
..... grade (school)	..... current address	

### Mother:

..... family name	..... first name	..... religion
..... nationality	..... contact (mail / phone)	

### Father:

..... family name	..... first name	..... religion
..... nationality	..... contact (mail / phone)	

**Custody:**  mother  father  somebody else .....

Siblings (name and age)

.....  
.....



**Languages**

Which languages did your child learn at school? For how many years?

English: ..... Russian: ..... other languages: .....

**Questions**

1) Have you had any Waldorf experience so far?

.....  
.....

2) Describe your child in a few words / sentences.

.....  
.....  
.....

3) Does your child have any health problems?

.....  
.....

.....  
Date          Place

.....  
Signature of mother or father