



St Saviour's  
& St Olave's  
School

# Ability Test 10.00 am Saturday 7th October 2017

Student's Name:

\_\_\_\_\_

Primary School:

\_\_\_\_\_

*Please attach a passport -  
sized photograph of your  
daughter here.*

*This is a security measure  
to verify that the child  
presented for the test is  
the child named on the  
application form.*

Please fill in the details and **keep the top (white) copy** of this form to bring with you on the day of the test. **Please leave the blue copy of the form in school.**

**On the day of the test:** Please arrive **at least 10 minutes before the test begins (9.50 am)**. Please ensure your daughter brings a **pen, pencil and ruler** with her, along with the **white copy** of this slip, with your daughter's photo attached to the space above.

You will **not** be able to wait for your daughter at the school but you should **return to collect her at 11.45 am**

**IMPORTANT: please fill in all the details below, as this is the address to which we will send confirmation of her position in the Ability Test List (as submitted to Southwark LA).**

Name of Parent/Carer: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_ Tel. No: \_\_\_\_\_

Mobile phone no: \_\_\_\_\_

Signature of Parent/Carer: \_\_\_\_\_

Date: \_\_\_\_\_