



MANSFIELD RUDOLF STEINER  
SCHOOL & KINDERGARTEN

*Alumni*

*Fostering a lifetime connection*

First Name.....Last Name.....Date of Birth / /

Current address:.....

Telephone.....Mobile.....Email.....

Left Mansfield Rudolf Steiner School & Kindergarten in year:.....Class level:.....

Teacher's name in final year:.....

Current position?: (degree/s or diploma/s obtained-if any) .....

*Tell us your story:*

History with the Mansfield Rudolf Steiner School, how did you get to where you currently are, what you are doing now.

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How has your Steiner education inspired or influenced your thinking in adult life?



PO Box 679 Mansfield Vic 3724  
91 Highett Street Mansfield 3722  
P: 03 5779 1445 Fx: 03 5779  
1438  
E;  
admin@mansfieldsteiner.vic.edu.a



# MANSFIELD RUDOLF STEINER SCHOOL & KINDERGARTEN

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What are your favourite memories from your student days at the Mairdample/Mansfield Rudolf Steiner school?

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Would you be available for a school function/speaking engagement/performance?

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## CONSENT:

I.....agree to Mansfield Rudolf Steiner School and Kindergarten reproducing and disclosing my profile information and photo/s supplied by me, for school publications, web site or school display.

Photo/s attached?    Yes    No    Photo/s emailed?    Yes    No    (please circle answer)

Signature.....    Date    /    /

We welcome additional pages of content or articles to be submitted with this cover sheet.  
To contact the school please email Sally Singleton/School Secretary:  
[admin@mansfieldsteiner.vic.edu.au](mailto:admin@mansfieldsteiner.vic.edu.au)

*We look forward to hearing from you!*

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