

ORDER FORM:

**Stepping Stones Assessment Units
Working Towards Level 1 2011/2012**

*This form should be used in conjunction with the Special Educational Needs Assessment Unit Catalogue.
(Issued September 1997)*

- Please complete in heavy print using **BLOCK CAPITALS**.
- **Assessment Units should be ordered for pupils in Years 4 and 7 only, numbers should be ordered for individual pupils.**
- Schools are asked to adhere to the **maximum entitlement of four Assessment Units per pupil per subject.**
- **This form should be signed by the Principal or authorised deputy and returned to the Council in the prepaid envelope no later than 28 February 2012. A copy should be retained by the school.**

School name: _____
 Full postal address: _____
 _____ Postcode: _____

DE school reference
number

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Contact name: _____

Tel no: _____

ENGLISH

Title	Attainment Target	Unit code	No. of Teacher Notes	No. of Pupil Activity Sheets
<i>Writing Fun</i>	Writing	EW101		
<i>Picture Stories</i>	Reading	EW102		
<i>Learning About Books</i>	Reading	EW103		
<i>Writing to Communicate</i>	Writing	EW104		
<i>First Steps to Writing</i>	Writing	EW105		
<i>I Can Trace</i>	Writing	EW106		
<i>I Can Copy</i>	Writing	EW107		
<i>How Good is Your Memory</i>	Reading	EW108		

MATHEMATICS

<i>Shape Up 2D</i>	Shape/Space and Processes	MW101		
<i>Symbols and Sets</i>	Number	MW102		
<i>Early Counting</i>	Number	MW103		
<i>Sorting</i>	Handling Data	MW104		
<i>Where Is It?</i>	Shape/Space and Processes	MW105		
<i>Sequencing</i>	Shape/Space and Processes	MW106		
<i>Big and Small</i>	Measures and Processes	MW107		
<i>Full and Empty</i>	Measures and Processes	MW108		
<i>Long and Short</i>	Measures and Processes	MW109		
<i>Shape Up 3D</i>	Shape/Space and Processes	MW110		

- The Council will endeavour to supply assessment units to schools within **three weeks** of receiving an order.
- **If you have any queries regarding this form please contact the Assessment Administration Team on (028) 9026 1405**

Signature: _____ (Principal or Authorised Deputy) Date: _____