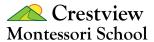


APPLICATION FOR ADMISSION

Thank you for choosing Crestview Montessori!
We seek committed, long-term families who value the lasting benefits of the Montessori approach and look forward to a multi-year journey of growth!

Today's Date		
Applying for year Please check pro	r 20/20 gram(s) applying to:	
☐ Half-Day ☐ Full Day ☐ Kinderga ☐ *After-S	y Primary Program (2 ½ to Primary Program (2 ½ to arten Program (5 years old School Care Program 3:00	o 5 year olds) 8:45 am — 12:00 pm o 5 year olds) 8:45 am — 1:00 pm (includes lunch) o 5 year olds) 8:45 am — 3:00 pm l by September 1st) 8:45 am — 3:00 pm pm-6:00pm enrollment of four children)
	CHILD IN	FORMATION
Full Name (First, Middle, Last)		Gender: □ Male □ Female
		Previously attended school? \square Yes \square No
Commonly Used First Name (if different)		Name of Previous School (if applicable)
Date of Birth	Current Age	Primary Language Spoken in the Home
	FAMILY IN	NFORMATION
Parent/Guardian Full Name		Parent/Guardian Full Name
Home Address		Home Address (if different)
City, State, Zip		City, State, Zip
Relationship to Applicant		Relationship to Applicant
Employer		Employer
Cell Phone		Cell Phone
Fmail Address		Email Address



Are there other children in residence? Family status: Name Age □Single □Married □Divorced □Separated Name Child lives with: □ Father □ Mother □ Both Age GENERAL HEALTH INFORMATION Is your child under the care of a doctor other Does your child have any health issue you think is important to tell us about, and has not been than a pediatrician? previously mentioned, e.g. speech therapy? (Details) Does your child have any physical/mental disabilities that require special attention? Does your child feed him/herself? □ Yes □ No (Details) Does your child dress him/herself? □ Yes □ No Is your child fully toilet trained**? □ Yes □ No Does your child have any allergies? □ Yes □ No **Bathroom independence is required before the first day of school. (Details) Age learned to talk? Age learned to walk? How did you learn about Crestview Montessori School? Please explain your interest in a Montessori school environment for your child: If your child has an IFSP/IEP please share a copy with us. This will help us address any individual needs your child may have. Parent /Guardian Name Signature Parent/ Guardian Name Signature Photo of your child (optional) PLEASE NOTE 1. A \$50.00 non-refundable Application Fee will be charged through Brightwheel. 2. If accepted, a \$1000 non-refundable Brightwheel deposit is required to hold a place for your child. This fee is applicable towards tuition.