

MONTESSORI CHILDREN'S SCHOOL

28370 Bassett Road - Westlake, Ohio 44145

Phone: 440/871-8773 Fax: 440/871-1799

www.montessorichildrengschool.com



Enrollment Application

___ Applying for the 20/ 20 School Year

___ Toddler 3 Day (M/T/W) ___ Toddler 2 Day (TH/F)

___ 5 Day AM Preprimary ___ PM Preprimary ___ Kindergarten

___ Bridge Class - Missing KDG age cutoff (Teacher recommendation required)

Child _____ Male ___ Female

First Middle Last

_____/_____/_____
Birth Date Age Years / Months Place of Birth

Student Ethnic Code: The State of Ohio Administrative Code 3301-39-01 to 3301-39-04 requires us to collect this information.

___ W=White/Non-Hispanic ___ H=Hispanic ___ B=Black/Non-Hispanic
___ A=Asian/Pacific Islander ___ I=American Indian/Alaskan Native ___ M=Multi-Racial ___

You have the option for self-designation. If preferred self-designate here: _____

Reason for applying to MCS: _____

Mother ___ Child's main address

Father ___ Child's main address

Mother's Name

Father's Name

Home Address City ZIP

Home Address City ZIP

Daytime Phone Cell Phone

Daytime Phone Cell Phone

Employer Occupation

Employer Occupation

Business Address Business Phone

Business Address Business Phone

Email

Email

Brothers & Sisters

Names & Ages

Grandparents

Names and Addresses

Information about Your Child

Previous School Experience:

School	Address	Duration
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Allergies	Medical Restrictions
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Regular Medications	Speech, Hearing, or Physical Limitations
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First Language	Second Language	Fears that we should be aware of
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Favorite activities in the home	Favorite activities outside the home
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Any other information:

How did you first hear of MCS?

- Older child attended MCS Name: _____
- Family member Name: _____
- Friend Name: _____
- Another School recommended MCS Name: _____
- Newspaper Advertisement
- Live in the community / School Sign
- Internet
- Other : _____

APPLICATION PROCEDURE

- 1) Submit completed application and the \$100.00 non-refundable fee to Montessori Children's School.
- 2) Upon receipt of the application and fee, you will be contacted concerning the enrollment and interview process.

Signature of Parent or Guardian: _____

Date: _____

OFFICE USE ONLY: Date Application Received: _____ Application Fee Paid _____

Montessori Children's School admits students of any race, color, sex, handicap, national or ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students of the school. The school does not discriminate on the basis of race, color, sex, handicap, national or ethnic origin in the administration of its educational policies and other school administered programs. MCS is an Equal Opportunity Employer and complies with all local and federal rules and regulations.



