



School Application

CHILD'S INFORMATION:

First Middle Last Birth Date Gender

PREVIOUS SCHOOL EXPERIENCE

HEALTH

School or Playgroup Duration Allergies

Requested school start date? _____

Requested Schedule: Circle One **Half Day** (8:30-12:30) **Full Day** (8:30-2:30) **Extended Care** (7:00-5:00)

Days Per Week: Circle One **3 Days** M-T-W-T-F **4 Days** M-T-W-T-F **5 Days** M-F

MOTHER (or guardian)

FATHER (or guardian)

Mother's name

Father's name

Street Address

Street Address

City

State/ZIP

City

State/ZIP

Home Phone

Cell Phone

Home Phone

Cell Phone

Email Address

Email Address

Business Name/Phone

Business Name/Phone

Do both Parents live with the child? _____

What is the custody schedule, if separated? provide necessary documentation.

Questions about your Child

What do you believe are your child's greatest strengths and weaknesses?

Does your child have any special needs (physically, emotionally, educationally etc.)?

Do you have any previous experience or history with Montessori Education?

Do



Application Procedure

Please return this application to the school via email (Marzi@StepbyStepSchools.com) or drop off in person. The application will be reviewed, and the Director will contact you with the current school's availability.

When your child is enrolled at Step by Step Montessori School you will be asked to submit a non-refundable \$250 registration/materials fee and non-refundable/non-transferable payment for your first month's tuition.

Parent or Guardian Date

Signature of

Step By Step Montessori School has a non-discriminatory policy relative to gender, race, color, and national origin with respect to the admission of students and the employment of faculty and administrative staff.

For Office Use
Only:

Notes: