



Montessori Academy application

Academic year applying for _____

- Half day
- Full day
- Extended day

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 Spartanburg, SC 29306
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 www.montessorispartanburg.com

CHILD

First <input type="checkbox"/> Male <input type="checkbox"/> Female	Middle	Last
	Birthdate	Age
	Place of Birth	Years
		Months

Previous school experience:

Montessori school	Duration
School	Duration
Playschool	Duration

Reason for applying to Montessori Academy:

MOTHER

 Mother's Name

 Home Address

 Home Phone

 Cell Phone

 Occupation

 Business Address

 Email Address

 Business Phone

FATHER

 Father's Name

 Home Address

 Home Phone

 Cell Phone

 Occupation

 Business Address

 Email Address

 Business Phone

HEALTH

Pediatrician's Name _____

Allergies _____

Address _____

Restrictions _____

Phone _____

Physical Impairments _____

Persons to call in case of emergency if parents cannot be reached:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Children will be released only to parents or to a person designated by the parents. A photograph or a copy of each designated person's Driver's License must be supplied to the school (**including parents**). List individuals that may pick up your child:

Name _____ Address _____ Driver's License # _____

Name _____ Address _____ Driver's License # _____

Name _____ Address _____ Driver's License # _____

Name _____ Address _____ Driver's License # _____

If no one can be reached in case of an emergency may we arrange for emergency care? _____

APPLICATION PROCEDURE

1. Call and arrange an appointment with the Director.
2. All prospective students and parents must be interviewed by the teacher.
3. Upon acceptance the enrollment fee is due.

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

Montessori Academy considers the records of all individual students to be confidential information available to a child's parents or guardians upon request. Records will only be released to other schools or agencies after all accounts due are paid in full.

Signature of Parent or Guardian

Date

OFFICE USE ONLY

Date of Interview

Registration fee

Date of Withdrawal

Date of Enrollment

School Placement

First Day of Class

Teacher(s)

Reason for Leaving