

Discovery Montessori School

Application for Enrollment

Date _____

The application is active for one year and renewable. \$25 Application Fee due with Form

Return to **Discovery Montessori School, 2836 34th Avenue West, Seattle, WA 98199**

Child's Name: _____ Birthdate: _____

Home Phone: _____ Phone #2 _____

Address: _____ Zip: _____

Mother: _____ **Father:** _____

Work Place: _____ Work Place: _____

Work Phone: _____ Work Phone: _____

Cell Phone: _____ Cell Phone: _____

e-mail _____ e-mail _____

Please list siblings and birthdates:

Describe your child's experience to date in terms of peer group and/or school

Describe your child's present health and significant health history: _____

Date of last physical exam: _____ Toilet Ready? _____

When do you wish for you child to begin attending Discovery Montessori? _____

Please indicate your interest in a schedule on the Enrollment Worksheet.

Discovery Montessori School

Enrollment Worksheet _____
Child's Name Birthdate

Parents, please use this worksheet to plan your child's enrollment for the Summer Session & the 2010 – 2011 School Year. This form and your application are submitted together.

- This is not an enrollment agreement. You will receive notice of enrollment times.
- Your selection of session and schedule will include you in our enrollment process.

Select your starting session...check schedule options below.

_____ **2010 Summer Session: June to August**

_____ 8 weeks _____ 4 weeks

_____ **2010 – 2011 School Year: September to June**

Schedule:

_____ **All Day:** 8:45a.m. – 3:15p.m.

_____ **Mornings :** 8:45 – 11:45a.m.

_____ **Afternoons:** 12:15 – 3:15p.m.

What are your reasons for choosing Montessori education for your child?

What do you hope for your child to gain from experience in our program?

Parent Signature _____ Date Submitted _____