**Heritage Montessori Day and Preschool**

**Application for Admission**

***Office Use Only:***

**Waitlist Fee ($50) \_\_\_\_\_\_\_ Medical Forms \_\_\_\_\_\_\_**

**Client Agreement \_\_\_\_\_\_\_ Report Cards (Day School Only) \_\_\_\_\_\_**

**Registration Fee ($900) \_\_\_\_\_\_ Copy of Birth Certificate \_\_\_\_\_\_\_**

**Annual Activity Fee ($125) \_\_\_\_\_\_ Emergency Contact Form \_\_\_\_\_\_\_**

**2 References from Previous School or Daycare \_\_\_\_\_\_**

***Parents, the section above is for office use only.* All items must be present in order to complete the admissions process. Please fill out the application below. If you would like to admit more than one child to our program, you must fill out an application for each child. The application has 3 sections. Please complete each section and return via email to the office at heritagemotessoriva@gmail.com.**

**Your privacy is important to us. Your information will be added to our school’s secure database.**

1. CONTACT INFO

**Child’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DOB:** \_\_\_\_\_\_\_\_\_\_ **Age at Admittance:** \_\_\_\_\_\_\_\_\_\_\_ **Requested Start Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Languages Spoken at Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Siblings Enrolling at Heritage Montessori Day & Preschool? YES \_\_\_\_\_\_\_ NO \_\_\_\_\_\_\_

If yes, name(s) of sibling: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child’s Home Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you divorced? If so, does one parent have primary custody? YES \_\_\_\_\_\_ NO \_\_\_\_\_\_\_

Which parent will be the primary pick-up and drop-off person? **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. PROGRAM

Heritage Montessori Day & Preschool offers 2 programs. Please choose the program you are applying for:

**DAY SCHOOL** (Age 6-12)

 Full Day \_\_\_\_\_\_\_\_

 Half Day \_\_\_\_\_\_\_\_

**PRESCHOOL** (Age 20 months to 5)

Full Day \_\_\_\_\_\_\_\_

 Half Day \_\_\_\_\_\_\_\_

\*\*Heritage Montessori does NOT offer a half-day program from children age 20 months-2 years. A child must be 3 years old at the time of enrollment in order to qualify for our half day program.

1. QUESTIONS

***Please answer the following questions about your child. (We ask that you print).***

1. **Does your child have any health conditions? Any allergies/medications?**
2. **Has your child had any prior school experience? If so, where?**

1. **Has your child undergone any academic, diagnostic, psychological or other testing?**
2. **Has your child had any experiences away from you?**
3. **What is your child’s sleeping/nap habits?**

 **6. Is your child potty trained? YES or NO?**

1. **We offer catered meals. What are your child’s eating habits? Likes/dislikes? Foods not allowed?**
2. **We advocate parent involvement. Would you be willing to come to school and do an activity with your child’s class? (cooking, art project, reading a book or anything else?)**

1. **What activities does your child like to do?**
2. **How did you learn about our school?**
3. **Is there anything else you would like to know?**

**Thank You!**

**Heritage Montessori Day and Preschool is a for profit, independent school with no religious affiliation, admitting applicants of any race, color, religion, sexual orientation or national or ethnic origin to all the rights, privileges, programs generally accorded or made available to students at the school. The Heritage does not discriminate on the basis of race, color, religion, sexual orientation or national and ethnic origin in administration of its administration of its educational policies, admissions policies and other school-related programs.**

**Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**School Administrator’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**