



Application for Admission

Child's Full Name _____ **Preferred Start Date** _____

Nickname _____ **Date of Birth** _____ **Gender** _____

Home Address _____
Street City State Zip

Home Telephone _____ **Public School District** _____

Parent/Guardian _____ **Marital Status** _____

Occupation _____ **Employer** _____

Business Address _____
Street City State Zip

Telephone _____ **Email Address** _____
Circle one: Mobile / Landline

Parent/Guardian _____ **Marital Status** _____

Occupation _____ **Employer** _____

Business Address _____
Street City State Zip

Telephone _____ **Email Address** _____
Circle one: Mobile / Landline

With whom does your child live? _____

Has your child had any prior experience with preschool or daycare? If yes, where?

Other Children in Household:

Name _____ **Age** ____ **School attending** _____

Name _____ **Age** ____ **School attending** _____

Name _____ **Age** ____ **School attending** _____

For Office Use Only: Date Rec'd _____ Fee Rec'd _____ Date of Observation _____ Date of Interview _____
Accepted Y or N Deposit Rec'd _____

Please circle all that apply

My child is applying for: Half Day preschool (9am-noon), Full Day preschool (9am – 3pm), or Full Day kindergarten (9am – 3pm)

My child will attend: Before-care (7:30 – 9am), After-care (3pm – 6pm), or BOTH

How frequently? Rarely/never Sometimes Most/all of the time

Help us get to know you and your child:

1. What aspects of the Montessori approach to early childhood education most appeal to you? _____

2. List any books or periodicals you have read on the topic of Montessori education.

3. What are your goals for your child before they reach elementary school?

4. What do you see as your child’s greatest strengths and challenges? _____

5. What are your child’s favorite activities? _____

6. Please specify any special developmental, educational, physical, or emotional needs of your child. (e.g. IEPs, allergies, etc.) _____

An application fee of \$25.00 must accompany this application. It is non-refundable and it does not apply towards tuition. Lakewood Montessori School does not discriminate on the basis of religion, race, sex, sexual orientation, gender identity, or national origin in the administration of its educational policies. Lakewood Montessori School admits students of any religion, race, sex, sexual orientation, gender identity, or national origin to all the rights, privileges, programs and activities generally accorded or made available to the students at the school. I hereby apply for the admission of _____ to Lakewood Montessori School and agree to abide by the rules and regulations thereof.

Signature of parent or guardian _____ Date _____

Please mail a HARD COPY of this application along with your check made payable to *Lakewood Montessori School* to our office: 1447 Orchard Grove Avenue Lakewood, OH 44107