

Magnolia Montessori School

Application for Admission

Child's Information: Last First Middle Nickname Date of birth Desired enrollment date Sex (F | M | X | N/A) Date of application Please indicate the MMS program you wish your child to attend: **TODDLER PRIMARY ELEMENTARY** (16-36 months) (2.5-6 years) (6-12 years) Half day (8:15- 12:45) Half day (8:15 - 12:45) Full day (8:15-3:15) _Full day (8:15 - 3:00) Full day (8:15 - 3:00) CHECK FOR EXTENDED CARE (All Ages) A.M. (7:15-8:15) P.M. (3-5:30) Family Information **PARENT/GUARDIAN 1:** Name Relation to student Email address Address Home phone Mobile phone Employer Position Work phone **PARENT/GUARDIAN 2:** Relation to student **Email address** Name Address Home phone Mobile phone **Employer** Position Work phone Application fee paid ☐ Waitlist Payment type: Invited Check Office Use Only: Online NOTES: Other: __ Date paid: ___/ ___/

ADDITIONAL PARENT/GUA	ARDIAN:			
Name		Relation to student	Email address	
Address		Home phone	Mobile phone	
Employer		Position	Work phone	
SIBLINGS:				
Names	Ages		Schools	
Names	Ages		Schools	
Please list any other perso	n(s) residing in the househo	old, including siblings or	other family members:	
Who else stays with your c	hild or helps with their care	e?		
Which languages are spok	en at home and to what ex	itent?		
Medical (<u>THIS SECT</u>) Please list your child's aller			can provide helps us best support you	ur child.)

Please list your child's dietary needs (including but not limited to: vegan, vegetarian, pork-free, dairy-free, gluten free, food allergies)
Has your child ever received any referrals?
Scholastic (We highly recommend that you allow 30 minutes to complete this section.) Going to school is a big milestone for any child and their family. Please complete the following to help us best understand your family's goals and vision for the years ahead!
Describe your child in three words:
In what activities and environments does your child shine?
What are your child's opportunities for growth?
What long-term social & emotional goals do you have for your child?
What long-term academic goals do you have for your child?
To which other schools are you applying?
Please include your child's experience with Montessori learning environments and list any schools your child has previously attended, with dates of attendance. Please include a few words to describe their experience(s):

Has your child ever been suspended, expelled, or asked to withdraw from a previous school	ol? (If yes, please explain.)
How did you hear about MMS?	
Have you attended or do you plan to attend a school tour at MMS? If yes, please indicate t	the date of your tour.
I authorize Magnolia Montessori School to contact current and previous schools to obtain	information to support my child's application.
PARENT/GUARDIAN'S SIGNATURE:D	Date
PARENT/GUARDIAN'S SIGNATURE:D	Date
Developmental Information ADMISSION REQUIREMENTS:	
Our guiding enrollment philosophy relies on a number of factors. We s	strive for balance in our classrooms.
Approval for student enrollment is ultimately at the o	discretion of MMS.
Generally, a child is first eligible to enroll in MMS programming beginning around a considered for admission to our Toddler Classroom Community. All children approclassroom must attend a Meet and Greet with their child's Lead Guide.	•
MMS will not explicitly rule out the enrollment of a child 14 months or older. A gual of a child younger than 16 months of age must arrange a meeting with the Toddler assess the child's relevant capabilities before their anticipated start date. In genera	r Lead Guide and/or MMS Director, who will
 Be able to independently and reliably walk for a length of time outlined by assessment. If the child is differently abled and meets the classroom's age accordingly. 	
 Be able to independently and reliably hold an approved object for a length leading the child's assessment. If the child is differently abled and meets to be assessed accordingly. 	•
ALL APPLICANTS:	
Please describe your child's daily schedule and routines (e.g. waking up, mealtimes, naptin	nes, activities, bedtime etc.):

TODDLER (16-36 mos) AND PRIMARY (2.5-6 yrs) APPLICANTS:
Is your child nursing? If so, how often, and when do you expect to wean?
Is your child toilet-trained? If not, have you started the process? PLEASE NOTE: A child must be working toward toileting independence to enter Primary. Please give a detailed description of your toileting method at home:
Does your child take a nap? If yes, how long/often?
A \$50.00 application fee must accompany this application. The fee is non-refundable. Please contact the MMS office if you need financial assistance.
Please send any questions or concerns about the enrollment process to the MMS Executive Director at ed@magnoliamontessorischool.com.

Magnolia Montessori School does not and shall not discriminate on the basis of race, ethnicity, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members of our staff, clients, volunteers, subcontractors, vendors, and partners.