



WEST SEATTLE MONTESSORI SCHOOL & ACADEMY

Mindful Leaders. Global Thinkers.
www.westseattlemontessori.com

GW	FT	GP
Received Date: _____		<input type="checkbox"/> Check#: _____ <input type="checkbox"/> VISA
Enrollment Fee		
Received Date: _____		<input type="checkbox"/> Check#: _____ <input type="checkbox"/> VISA

NEW STUDENT APPLICATION

We follow an academic school year, the first Wednesday after Labor Day through the first Friday in June. We offer supplemental care and camps during our breaks.

PREFERRED ENTRANCE:

Current School Year Future School Year, Fall 20_____

PROGRAM LEVEL:

Toddler Full Day

Pre-Primary Full Day Kindergarten (age 5 by August 31)

Lower Elementary 1st 2nd 3rd **Upper Elementary** 4th 5th **Middle School** 6th 7th 8th

STUDENT LEGAL NAME:

_____ (Last) (First) (Middle) (Preferred)

Date of Birth _____/_____/____ Age: _____ Gender: Male Female

STUDENT & PROGRAM LEVEL

GUARDIAN 1: Name _____ Student lives with

Address _____ Phone 1 _____ cell work

City/St/Zip _____ Phone 2 _____ cell work

Email Address _____

Occupation _____ Employer Name _____

GUARDIAN 2: Name _____ Student lives with

Please complete information below if different from above.

Address _____ Phone 1 _____ cell work

City/St/Zip _____ Phone 2 _____ cell work

Email Address _____

Occupation _____ Employer Name _____

Student's Siblings:	Name	M/F	Age	School or Occupation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

FAMILY INFORMATION

Optional Demographic Data:

Your response to the question in this section is optional. We respect your privacy and will use the information for statistical purposes only. We appreciate your responses; they will not be used to discriminate against your family in any way.

- | | | |
|---|--------------------------------|--|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> White | <input type="checkbox"/> Other _____ |

DEMOGRAPHICS

SOCIAL EXPERIENCE:

How does your child relate to other children?

How does your child relate to other adults?

What are three words that come to mind when describing your child?

What are some of your child's strengths?

What are some of your child's challenges and what do you do to help your child through these challenges?

SCHOOL EXPERIENCE:

Has your child been enrolled in another school, preschool or daycare? Yes No Montessori Experience

Name: _____ Number of Years Attended _____

Has your child ever exhibited behavioral concerns at home, daycare or school?

Yes No If yes, please explain.

Has your child ever been tested for, or received, special services for a learning strength or challenge?

Yes No If yes, please check all that apply.

Dyslexia Dysphasia/Aphasia Speech Therapy Dyscalculia Visual Processing Disorder

OT Dyspraxia ADD/ADHD Dysgraphia Auditory Processing Disorder

PT Dyspraxia Applied Behavioral Analysis Giftedness/Asynchrony

Other _____

Does your child have an IEP, 504 plan or other professional recommendation for any of the above?

Yes No If yes, please include a copy of the report. If no, please explain.

ACKNOWLEDGEMENT:

I understand that the fee associated when submitting my application is non-refundable and non-transferable.

I understand that my application will remain active, and on the waitlist, indefinitely until a spot becomes available. I also recognize that enrollment is based on availability and acceptance may occur at any time and for any level beyond the level for which I first applied.

Guardian Signature: _____ **Date:** _____

West Seattle Montessori School & Academy is non-sectarian and non-discriminating. We strive to provide quality education to all children and will work with students and families to the best of our abilities to meet the child's needs as an individual; however, we are not equipped to provide specialized programs for students with significant emotional, behavior, social, or learning challenges.