



## Admissions Checklist

Please refer to the following when applying for admission to Meeting House Montessori School:

**PARENT OBSERVATION AND SCHOOL TOUR** Please call the school and schedule an appointment for a classroom observation. Observations are scheduled for 9:15am.

**WRITTEN APPLICATION AND APPLICATION FEE** Please fill out the application and return to the school with the \$50 non-refundable application fee on or before your classroom observation.

**STUDENT VISIT** After your application and application fee has been received, please schedule an appointment for a student visit. Student visits are scheduled at 9:15 am and last 20 to 30 minutes.

*Meeting House Montessori School is a three-year program; we encourage enrolling children at three years of age (2.9 is the youngest eligible age) in order to experience the maximum benefits of a Montessori education. To that extent, we consider applications from families with three year old children first and then four and five year olds.*

*Children attending Meeting House Montessori School Pre Primary will be given preference in enrollment to the Meeting House Montessori Elementary program as Meeting House Pre- Primary students. Children applying from outside the program need not have attended a Montessori program in order to be considered for enrollment.*

*Letters of Acceptance and Enrollment Contracts will be mailed beginning mid-April. If you have any questions regarding the application and enrollment process, please call 781-356-7877*



# student application

Application Form

Date of Application \_\_\_/\_\_\_/\_\_\_

STUDENT NAME \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender M/F \_\_\_\_\_

Parent \_\_\_\_\_ Parent \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-Mail \_\_\_\_\_ E-Mail \_\_\_\_\_

Profession \_\_\_\_\_ Profession \_\_\_\_\_

Name of Employer \_\_\_\_\_ Name of Employer \_\_\_\_\_

Student live with: \_\_\_\_\_

Siblings & Ages \_\_\_\_\_

Child's current school \_\_\_\_\_

Does your child participate in any special tutoring or enrichment? (speech or  
Occupational therapy etc) \_\_\_\_\_

\_\_\_\_\_

Has your child had any individual testing? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What would you like your child to gain from a Montessori experience? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there anything you would like us to know about your child? \_\_\_\_\_

\_\_\_\_\_

PROGRAM DESIRED

PRE PRIMARY (3-6)

Half Day                      8:30-11:30

Full Day                      8:30-3:00

ELEMENTARY

Lower Elementary      (6-9)     

Upper Elementary      (9-11)     

EXTENDED DAY

Before School Care      7:30-8:20

After School Care      3:00-4:00

After School Care      3:00-5:00

After School care      3:00-6:00

Please return this form with \$50 non-refundable application fee. Upon the child's acceptance, a contract will be sent to you to be signed and returned with a non-refundable deposit to hold a place for your child.

MHMS admits children of any sex, race, color, religious affiliation, national and employment practices

Signature \_\_\_\_\_ Date \_\_\_\_\_