

COUNTRYSIDE MONTESSORI SCHOOL
APPLICATION FOR ADMISSION

Preferred Start Date: _____

Wait list option? ___yes

___no

How many days per week are you interested in enrolling your child? _____

If choosing less than five days, please write 1ST-5TH in the order of preference and we will do our best to accommodate.

Mom's Day Out (12-24 months) TWO DAY MINIMUM REQUIRED

(8:30 a.m.-12:30 p.m.) Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Infant/Toddler (8 weeks - 24 months) TWO DAY MINIMUM REQUIRED

Full Day (8:30-3:30) Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Extended Day (7:00-5:30) Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Toddler Class (2's and non-potty trained 3's) TWO DAY MINIMUM REQUIRED

Morning Class (8:30-11:30): Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Full Day (8:30-3:30) Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Extended Day (7:00-5:30) Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Preschool Class (ages 3-6) 3 YR OLD-MIN. 3 DAYS/4YR OLD-MIN 4 DAYS/5 YR OLD-MUST ATTEND 5 DAYS

Morning Class (8:30-11:30): Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Full Day (8:30-3:30): Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Extended Day (7:00-5:30): Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Child's Name _____ Birth Date _____ M ___ F ___

Home Address _____ Phone _____

_____ Cell _____

(City) (State) (Zip)

Email Address (only to be used for School memo's) _____

Parent's Name _____ (male/female) Occupation _____

Parent's Name _____ (male/female) Occupation _____

Child's previous preschool experience _____

Other information about your child that we should be aware of _____

Notification of acceptance for admission will be made by letter. The letter will be accompanied by an Enrollment Form, Photo Permission & Tuition Policy Form, and Immunization Record & Medical Permit, all of which are to be completed by the parents and returned to Countryside within ten days. Please be aware that Countryside has an annual material fee of \$150 in lieu of any fundraising.

Signature of Parent _____ Date _____

Please return this form with a one-time non-refundable application fee of \$75 (payable to Countryside Montessori School) to:

Jenifer Hanser, Administrator
Countryside Montessori School
12226 Ladue Road, Creve Coeur, MO 63141

OFFICE USE ONLY:

- APP FEE
- CONFIRM
- FORMS SENT
- DEP _____