

Ravenswood Montessori School

Caring for and educating children from ages 2 to 6

Days Desired: _____

(Please note that effective immediately, RMS will only be taking applications for 5 day a week students)

Hours Desired: _____ to _____

Projected Start Date: _____

App. Fee Chk No: _____

Date: _____

Amount: _____

Interview date: _____

Room assignment: _____

Start Date: _____

Application for Enrollment

Submission of your child's application for enrollment does not guarantee admission.

Your child's enrollment has many factors including the discretion of the Head of School as well as availability.

Name of Child (Last) (First) (Date of Birth) (Sex)

Address (Street) (City) (State) (Zip Code)

Parent's Name

Parent's Date of Birth

Address (City) (Zip Code)

() _____
Phone Number

Occupation

Place of Employment

Address of Employer

() _____
Phone Number

Hours Worked

Personal Email Address

Nationality

Marital Status

Parent's Name

Parents' Date of Birth

Address (City) (Zip Code)

() _____
Phone Number

Occupation

Place of Employment

Address of Employer

() _____
Phone Number

Hours Worked

Personal Email Address

Nationality

Marital Status

If parents are separated, divorced or if any court orders have been issued which concern the child(ren) seeking enrollment, please provide a copy of such paperwork with this application and briefly describe the situation.

Please provide the names and birth dates of all siblings:

1. _____
Name Date of Birth

2. _____
Name Date of Birth

3. _____
Name Date of Birth

Has the child been enrolled at any schools/centers previously. _____
If so, please state 1) name; 2) address; and 3) dates child was enrolled; and 4) reason for leaving

1) _____ 2) _____

3) _____ 4) _____

1) _____ 2) _____

3) _____ 4) _____

Effective May 1, 2019: All children enrolled at RMS must be up to date on all vaccinations. We do not accept children who are not vaccinated. Complete vaccination records are due to the school one week prior to enrollment.

"I hereby certify that the information provided herein is complete and accurate to the best of my knowledge and belief."

Signature of Parent

Date

Signature of Parent

Date

