



ADMISSION APPLICATION

The Admission Process at Culver City Montessori Preschool is as follows:

1. Parent submits an Admission Application to be considered for Enrollment. A \$100 non-refundable fee is due at the time the application is accepted.
2. When space becomes available, you will be notified and an appointment will be set for an interview and a child observation. The child will be observed in the Montessori classroom for approximately 30 minutes in the presence of the parents. Once the child has settled in the class, the parents will meet with the Director to discuss the Enrollment process.
3. Within a two week period, an afternoon playdate will be setup where the child will have an opportunity to interact with other children for approximately one hour. Once this process is completed, the Enrollment Agreement will need to be submitted along with a \$300 non-refundable, annual registration fee plus one month's deposit.
4. There will be a 2 week trial period at the beginning of enrollment to see how the child fits into the Montessori/Immersion program. At the end of the trial period, parents will meet with the Director to review the child's transition and progress. At this time any issues/concerns will be discussed. If it is determined that Culver City Montessori or its program(s) is not the right fit for the child, the parents will be given an opportunity to look for another school within two weeks. Enrollment will officially end 30 days from the initial start date. The one month's deposit will be refunded, minus any unpaid balances. Application and Registration fees are non-refundable.
5. Once the child has been accepted into our program, it is important for the child to become acquainted with the teachers and their peers. Therefore, two additional play dates will be arranged one week before your child's start date.

By signing below, I have read and understood the above Admission Process for my child(ren) at Culver City Montessori Preschool. I further agree that Culver City Montessori Preschool is a private school and has the right to determine eligibility for enrollment based on the school's criteria without prejudice or discrimination due to racial, ethnic, social or financial background.

Parent/Guardian's Name _____

Signature _____ Date _____

Parent/Guardian's Name _____

Signature _____ Date _____



ADMISSION APPLICATION

Child's Name: _____ Birthdate: _____ Male Female

School Year _____ to _____ Enrollment Start Date: _____

CLASS LEVEL: Pre-Primary2.5 - 3 years old
 Primary3 - 4 years old
 Pre-Kindergarten / Kindergarten4 - 6 years old

ENGLISH PROGRAM: 5 Extended Days7:00 am - 6:00 pm.....\$1,400.00
 5 Full Days8:00 am - 2:30 pm\$1,300.00
 5 Half Days8:00 am - 12:00 pm\$1,100.00
 Spanish or Mandarin Class (one hour per week)\$100.00

IMMERSION PROGRAM: 5 Extended Days7:00 am - 6:00 pm (Two languages plus am/pm daycare)..\$1,900.00
 5 Full Days8:00 am - 5:00 pm (Two languages)\$1,750.00
 5 Extended Days7:00 am - 6:00 pm (English and one language)\$1,600.00
 5 Full Days8:00 am - 2:30 pm (Mandarin or Spanish).....\$1,500.00
 5 Half (Mornings).....8:00 am - 12:00pm (Mandarin or Spanish)\$1,300.00

SELECT LANGUAGE(S): Mandarin Spanish (Select one or two languages based on program choice)

ADDITIONAL OPTION: Monthly Lunch Program or Pizza Fridays _____

TOTAL MONTHLY: This fee will be due on the FIRST day of each month. _____

(Initials) I certify that my child has received all the necessary immunizations. Proof of immunization from a Doctor will be provided as a condition of enrollment at Culver City Montessori Preschool.

(Initials) A 10% late fee will be added automatically if payment is not received on or before the first day of each month.

(Initials) A one-time, non-refundable Application fee of \$100.00 is due upon submission of this application.

(Initials) A non-refundable Registration fee of \$300.00 is due upon acceptance and is paid annually. This fee will guarantee a place for your child at Culver City Montessori Preschool.

(Initials) One month's tuition deposit is due at time of acceptance. Deposit will be applied towards the last month's tuition.

Parent/Guardian _____ Phone _____

Signature _____ Date _____

Parent/Guardian _____ Phone _____

Signature _____ Date _____

Email addresses: _____

How did you hear about us? _____

Note: By signing this application you fully understand and agree with all the policies of Culver City Montessori Preschool, Inc. Tuition and fees are subject to change.



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Admission Date	Sex	Date of Birth	Age
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Child's Last Name	First Name	Middle	Name Called
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Child's Address	City	Zip Code	Home Phone
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Father's Name	Occupation	Driver's Lic.# & State
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Company Name	Work Phone	Cell Phone	Email
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Mother's Name	Occupation	Driver's Lic.# & State
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Company Name	Work Phone	Cell Phone	Email
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Are parents living together, married, separated or divorced? _____

PERSONS TO CALL IN CASE OF EMERGENCY IF PARENTS CANNOT BE REACHED:

Name and Relationship	Driver's Lic.# & State	Phone#
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Name and Relationship	Driver's Lic.# & State	Phone#
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CHILD'S PHYSICIAN	Address	Phone#
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List below any health problems such as allergies, existing and previous, illness and injuries, which the staff should be aware of:

Name of Sibling	Age	School
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Name of Sibling	Age	School
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Is the child right or left handed? _____

Please list previous schools and / or day care facilities your child has attended and how long.

Reasons for choosing Montessori Program: _____

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PARENT OR GUARDIAN AUTHORIZATIONS AND AGREEMENTS

Supervision and Release of Child:

When a child is brought to this school, the child will be left with a staff member and released only to the parent or persons named by the parent. Individuals listed below must present their ID in order for the child to be released:

Name and Relationship Child May be released to	Driver's Lic.# & State	Phone#
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Name and Relationship Child May be released to	Driver's Lic.# & State	Phone#
--	------------------------	--------

Name and Relationship Child May be released to	Driver's Lic.# & State	Phone#
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NOTE:

The individual authorized by you to pick up your child MUST present a valid I.D. in order for the child to be released.

HEALTH RECORD STATEMENT FROM PARENTS:

I certify that my child _____, has been examined by a licensed physician within the past twelve months and is able to participate in programs offered by Culver City Montessori Preschool. I also certify that my child's tuberculosis test is current and on file with Culver City Montessori Preschool.

Agreement: I have read and accept the policies and procedures of Culver City Montessori Preschool.

Signature of Parent or Guardian

Date