



Cinquegranelli Montessori

Every child comes here with his or her own gifts

APPLICATION FOR ADMISSION

Today's Date: _____

Enrollment Date: _____

Student Information

Child's Full Name (First Middle Last)

Date of Birth _____ Sex: Male / Female

Home Address _____ City/State _____ Zip _____

Home Phone _____ Child Lives With _____

Parent/Guardian Information

Mother/Guardian Full Name _____ Father/Guardian Full Name _____

Home Address (if different from child) _____ Home Address (if different from child) _____

Work Phone _____ Cell Phone _____ Work Phone _____ Cell Phone _____

Employer and Occupation _____ Employer and Occupation _____

Email Address _____ Email Address _____

Siblings

Cinquegranelli Montessori

3316 NW 68th Street | Seattle, WA | 98117

t: 206/789.2942 | e: cinquegranelli.montessori@gmail.com | w: www.cinquegranelli.com

Names of Siblings

Age

Current School

Emergency Contacts & Pick-Up Authorization

Emergency Contacts:

Name

Relationship

Phone

Name

Relationship

Phone

The following persons are authorized to pick up my child:

Name

Relationship

Phone

Name

Relationship

Phone

Interests & Survey

We introduce your child to Italian through daily activities, songs and stories. Group lessons incorporate both listening and movement so children can internalize meaning. Words and expressions are connected to practical life experiences whenever possible. The following information will enable us to know your child better.

What are your child's special interests, capabilities, or talents?

Why is the Montessori Philosophy attractive to you?

Has your child had prior school or childcare experience? Yes / No

Cinquegranelli Montessori

3316 NW 68th Street | Seattle, WA | 98117

t: 206/789.2942 | e: cinquegranelli.montessori@gmail.com | w: www.cinquegranelli.com

If yes, where? _____ At what age? _____

For how long? _____

Please tell us how you found out about Cinquegranelli: _____

Health History / Medical Information

Does your child have any health issues or special needs that we should know about (e.g. vision, hearing loss, allergies, asthma, physical limitations)?

Requirements for Admission

Important Notice: State law requires all students to be immunized before they enter school. Please complete/update the immunization form and return it to Cinquegranelli before the first day of school.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

We welcome families of all races, genders, nationalities, and ethnic origins.

Return Completed Application for Admission Information

Return your completed application for admission with a \$150.00 non-refundable new student registration fee to:

Cinquegranelli Montessori
3316 NW 68th St.
Seattle, WA 98117

This fee covers our Slow Start Program beginning on August 29th, 2017 and holds a place for your student in our school.