



FORBES HILL
MONTESSORI SCHOOL

Application For Admission

Please attach a recent
photo of your child.

Applicant's Information

Child's Name _____

Date of Birth _____

Place of Birth _____

Primary Language _____

Address _____

Home Phone _____

Admission for Fall of What Year? (Or start date if during year) _____

Applicant's Siblings (if any)

Sibling Name and Date of Birth _____

Sibling Name and Date of Birth _____

Sibling Name and Date of Birth _____

Parent / Guardian Information

A. Name and Address _____

Cell Phone and Email _____

Employer, Position _____

Work Hours _____

B. Name and Address _____

Cell Phone and Email _____

Employer, Position _____

Work Hours _____

Has your child attended daycare/preschool? If yes, please state where and for how long.

Is your child currently receiving therapy of any kind, or has your child in the past received therapy?

Does your child have an Individual Healthcare Plan (IHP) for a condition they may have?

Why are you considering Forbes Hill Montessori School and what kind of experience do you hope your child to receive while attending?

How did you learn about Forbes Hill Montessori School?

Application Fee

Please return this form with a non-refundable application fee of \$50 made payable to:
Forbes Hill Montessori School

Non-Discrimination Policy

Forbes Hill Montessori School does not discriminate against individuals on the basis of race, creed, religion, national origin, cultural heritage, age, gender, marital status, political beliefs, disability, sexual orientation, or family style, in its admissions, employment policies and procedures.

Signature of Parents / Guardians

_____ Date _____

_____ Date _____