

Application for Admission



Date of Application: _____ Requested start date: _____

Child's Full Name: _____ Nickname: _____

Birth date: _____ Sex: _____

Please check program desired:

- Toddler House Environment (16 months - approx. 3 years) - This is a 12-month year round program
- Children's House Preschool Environment (approx. 3 - 6 years)
 - 9-Month Program Contract (Labor Day through Memorial Day)
 - 12-month Program Contract (Includes Summer Programming)
 - Please contact me with soonest option available

Please check schedule desired:

- 5 Morning (8:30 - 12:15)
- 5 School Day (8:30 - 3:30)

Please mark any additional care requirements:

- Before School Care (7:45 - 8:30)
- After School Care (3:30 - 5:30)
- Before & After School Care (7:45 - 5:30)
*Note Summer Program hours until 4:45pm

Do you have flexibility with your desired schedule? (Flexibility on schedule can help chances of enrollment if your desired option is full. Note any potential schedule flexibility:

Parent #1 Name: _____ Cell Phone: _____

Home address: _____ City: _____ State: _____ Zip: _____

Employer's Name: _____ Occupation: _____

E-mail address: _____

Parent #2 Name: _____ Cell Phone: _____

Same as above

Home address: _____ City: _____ State: _____ Zip: _____

Employer's Name: _____ Occupation: _____

E-mail address: _____

Other Children in Family

Name _____ Age: _____ School: _____

Name _____ Age: _____ School: _____

Child lives with: _____

Person(s) responsible for tuition: _____

How did you hear about our program?

Website Search

Passed by

Word of Mouth/Referral from:

Other:

Does your child have any allergies or dietary restrictions?

If yes, please explain:

Does your child take a nap during the day? _____ If so how long? _____

Toilet Training to date: Not Yet Applicable Just Beginning Mostly Toilet Trained Fully Toilet Trained

Does your child have previous Montessori experience? _____ If so, where? _____ Does

your child have previous childcare experience? _____ If so, where? _____

Do you intend to enroll your child at Sunshine for the complete Children's House 3 year program cycle (which for some students includes the "kindergarten" year)? _____

What interests you about a Montessori education for your child?

How would you describe your child?

What are you looking for in a preschool experience?

Has your child ever received any specialized care or evaluations (medical, physical, developmental, behavioral, emotional) or have an IEP? If so, please describe how we can best support your family?

- Applications are kept on file for two years from their receipt.
- All applications must include payment of the non-refundable application fee.
- Application does not guarantee admission to the school. Families should review our admissions process on our website prior to submitting an application.
- When a potential space becomes available, Sunshine will contact applicants via emails listed on this application.
- Priority enrollment is given to siblings and families intending to enroll in the full 3-year Montessori Children's House program cycle.
- The information provided will be kept in confidence and made available to staff who work with your child and to the MN Dept. of Human Services to assure our compliance with licensing requirements.

I have attached a check for the \$75 Application Fee made out to Sunshine Montessori.

Applications with checks can be either mailed or dropped off to
Sunshine Montessori School 4557 Colfax Avenue S. Minneapolis, MN 55419

-OR-

**I have submitted the application fee via paypal at <https://paypal.me/SMSminneapolis>
BE SURE TO MAKE A NOTE *application for (insert child's name) with online payments.**

Parent/Guardian Signature

Date

For Office Use Only

Application Recieved On: _____

Payment Made:

Check Paypal

Confirmed