



# Renaissance Montessori School

## Application for Admission to Academic Programs

- 1.) Fill out a separate application form for each applicant;
- 2.) Mail with non-refundable \$50.00 application fee per applicant to:

Renaissance Montessori School - P.O. Box 10043 - Manassas, Virginia 20108  
For more information, visit [www.RenaissanceMontessoriSchool.org](http://www.RenaissanceMontessoriSchool.org).

### Program Selection

- The Elementary Program (8:15-3:00 Mon.-Fri.; ages 7-12; tuition \$7,500)
- The Full Day Primary Program (8:15-3:00 Mon.-Thurs., Fri. 8:15-11:45; ages 5-7; tuition \$6,900)
- The Half Day Primary Program (8:15-11:45 Mon.-Fri.; ages 2½-7; tuition \$5,600)

*The above rates are for the 2010-2011 academic year.*

### Child Information

Name of Child: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Nickname: \_\_\_\_\_

Is the child adopted? \_\_\_\_\_ If so, at what age? \_\_\_\_\_ Does the child know? \_\_\_\_\_

### Parent Information

Parents or Guardians: \_\_\_\_\_  
(Father) (Mother)

Marital Status:  Married  Separated  Divorced  Single  Widowed

If divorced, are parents remarried?  Father  Mother

If divorced, what age was the child when the divorce occurred? \_\_\_\_\_

Is either parent deceased? \_\_\_\_\_ Is either parent away for prolonged periods? \_\_\_\_\_

Has either parent ever been convicted of a crime? \_\_\_\_\_ If yes, please explain on reverse side.

Address: \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Father's Occupation: \_\_\_\_\_ Place of Business: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Mother's Occupation: \_\_\_\_\_ Place of Business: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

## Religious Information

Religious denomination: Mother: \_\_\_\_\_ Father: \_\_\_\_\_

Is the child baptized? \_\_\_\_\_ If so, please give the date: \_\_\_\_\_

## Home Life

Is the child regularly cared for by anyone other than his parents? \_\_\_\_\_

By whom? \_\_\_\_\_ For how many hours per day? \_\_\_\_\_

In his home? \_\_\_\_\_ If not, where? \_\_\_\_\_

Describe the child's play / leisure activities:

Outdoors: \_\_\_\_\_

With other children: \_\_\_\_\_

Favorite activities, games: \_\_\_\_\_

Favorite toys and books: \_\_\_\_\_

Does the child watch television? \_\_\_\_\_ If so, how many hours per day? \_\_\_\_\_

Programs that the child watches: \_\_\_\_\_

Indicate which best describes your child's temperament in group settings:

Outgoing and Social     Shy, Needs Encouragement     In Between

Family Members:

List the other children in the family (if any):

List other members of the household (if any):

.....

## Education

If your child has prior schooling, please indicate below.

School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hrs. per day: \_\_\_\_\_ Days per wk. \_\_\_\_\_  
(mo./yr.) (mo./yr.)

School: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Hrs. per day: \_\_\_\_\_ Days per wk. \_\_\_\_\_  
(mo./yr.) (mo./yr.)

If applicable, the grade your child is currently in: \_\_\_\_\_

## **Additional Information**

How did you come to the decision to send your child to a Montessori school?

What are your expectations for your child at Renaissance Montessori School?

- Please check this box if you would like to apply for financial aid. Additional information and relevant forms will be sent to the address provided on this application.

Signing this application form gives your assent to the following statement.

I understand that Renaissance Montessori School has the right to accept or reject applicants based on its own standards, in the interests of maintaining a productive growth and learning environment for all students. I understand that my \$50.00 application fee is a non-refundable processing fee and will not be returned to me if my child is not accepted.

Signature of Parent: \_\_\_\_\_

Date: \_\_\_\_\_