

  
**COMMUNITY MONTESSORI**  
**APPLICATION FOR ADMISSION**

<b>OFFICE USE ONLY</b>	
Date Rec	_____
Dec Date	_____
Dep Date	_____
Start Date	_____

\_\_\_\_\_  
**Child's Name** *(first, middle, last)*
\_\_\_\_\_
**Child's Nickname** *(if applicable)*

\_\_\_\_\_ **Male**  **Female** 
\_\_\_\_\_
**Child's Date of Birth** *(mm/dd/yyyy)*
\_\_\_\_\_
**Current Age**
\_\_\_\_\_
**Public School District of Residence**

**Parent/Guardian 1:** Dr  Mr  Mrs  Miss  Ms 
**Parent/Guardian 2:** Dr  Mr  Mrs  Miss  Ms

\_\_\_\_\_  
Name

\_\_\_\_\_  
Relationship to applicant

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Mobile Phone

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Name

\_\_\_\_\_  
Relationship to applicant

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Mobile Phone

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
E-mail

**Child resides with:**  
 Both Parents/Guardians  Parent/Guardian 1  Parent/Guardian 2  Other *(please specify)* \_\_\_\_\_

Child's siblings:	Age	Grade	Name of day care/school attending
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have experience with Montessori and/or basic knowledge of Montessori philosophies? Yes  No   
 Do you anticipate requesting a need-based tuition scholarship? Yes  No  Don't know

**Desired Enrollment Date** *(month/year):* \_\_\_\_\_

**Interested in before/after school care?** Before  After  Both  Neither

Please list this child's day care and/or school experience(s), including school name(s) and dates or grades of attendance.

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Is there anything in this child's health, behavioral, or psychological history that may affect his or her participation in school activities? Yes  No  If yes, please briefly describe below. Note that reasonable accommodations will be made provided that no changes to the program are required and that the child does not pose a risk to him- or herself or to others.

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Has this child been tested or evaluated for any learning challenges or is there reason to be concerned about any learning difficulties? Yes  No  If yes, please briefly describe below.

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Does this child have any allergies? Yes  No  If yes, please identify and indicate the severity.

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RiverRun strives to provide the best individualized education possible. Please briefly describe this child's temperament, social relations, and interests, along with any other information you believe is important to share.

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What is the ethnicity and race of this child? This information will be used for aggregate reporting purposes only. An individual's identifying information will be kept private. Answering is optional and will not influence acceptance into RiverRun.

Ethnicity: Hispanic, Spanish, or Latina(o)  Not Hispanic, Spanish, or Latina(o)

Race: (select all that apply) White  Black  Asian  Native Hawaiian or Pacific Islander  Native American or Alaska Native

**A NON-REFUNDABLE FEE OF \$50 IS REQUIRED WITH THIS APPLICATION.**

The enclosed application fee is non-refundable and not applicable to tuition. Make checks payable to RiverRun Community Montessori.

RiverRun does not discriminate on the basis of gender, race, color, creed, or national or ethnic origin in its admissions policies.

Acceptance is based on a good match between the child and the school, as well as family commitment to Montessori education and the child's likely long-term attendance at RiverRun.

Once accepted, on-going enrollment is contingent upon the mutual satisfaction of both the student and the school.

RiverRun reserves the right to contact a previously attended school if deemed necessary.

Signing below indicates you have read the above and that all information contained in this application is honestly presented.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return completed form and \$50 application fee to:  
RiverRun Community Montessori | P.O. Box 9423 | Schenectady, New York 12309

Want more information? E-mail [info@RiverRunMontessori.org](mailto:info@RiverRunMontessori.org) or visit [www.RiverRunMontessori.org](http://www.RiverRunMontessori.org)