



Primary School Application (3-4 Year Olds*)

GENERAL STATEMENT

I/We, _____

Hereby apply to enroll my/our child, _____

in Khalsa Montessori Primary School for the _____ School Year**.

**Child must be three years old by 09/01 of the coming school year to apply. **The Application is for one school year only. It does not roll over.*

Does your child have a sibling who is currently enrolled or in an age-eligible pool? Yes No

Enrolled Please list name(s): _____

In an age-eligible pool Please list name(s): _____

BACKGROUND

Child's date of birth: _____ / _____ / _____

Gender: Male Female Is your child potty trained? Yes No

Previous School(s): _____

Previous Montessori training?: Yes No Montessori School: _____ Years attended: _____

EDUCATION VIEWS & PLANS

Why are you choosing Montessori for your child? _____

How many years do you plan to have your child in Khalsa Montessori? _____

How did you hear about Khalsa Montessori? _____

PARENT INFORMATION

Mother/Guardian: _____

Father/Guardian: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Home Phone: _____

Home Phone: _____

Work Phone: _____

Work Phone: _____

Cell Phone: _____

Cell Phone: _____

Email: _____

Email: _____

PARENT SIGNATURE(S)

I/We understand that Khalsa Montessori Primary School (KMPS) contracts are based on school year (August-May) commitments. I/We understand that my Application will be placed in an age-eligible pool and I/We will be contacted for a student assessment when and if an opening becomes available. I/We understand it is my/our responsibility to inform Khalsa Montessori with any changes to our contact information.

Mother/Guardian Signature Date

Father/Guardian Signature Date