



Kindergarten – 8th Grade Wait List Application

GENERAL STATEMENT

I/We, _____

Hereby apply to enroll my/our child, _____

in the Khalsa Montessori Elementary School, Grade Level*: _____ for the 19 / 20 School Year**.

**Child must be five years old by 09/01 of the coming school year to apply for kindergarten and six years old by 09/01 of the coming school year to apply for first grade.*

***The Wait List is for one school year only and does not roll over.*

Does your child have a sibling who is currently enrolled at KMS or is currently on the KMS Wait List? Yes No

Enrolled Please list name(s): _____

On Wait List Please list name(s): _____

BACKGROUND

Child's date of birth: ____ / ____ / ____ Gender: Male Female

School currently attending (or most recently attended): _____

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

Has child ever been suspended from any school? Yes No If yes, when? _____

PARENT INFORMATION & SIGNATURE(S)

Parent 1/Guardian: _____

Parent 2/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 this Wait List Application will be considered on a first-come, first-served basis and I/WE will be contacted for a student placement assessment when and if an opening becomes available.

Parent 1/Guardian Signature Date

Parent 2/Guardian Signature Date