



# Kindergarten – 6<sup>th</sup> Grade 2023 - 2024 Wait List Application

## GENERAL STATEMENT

I/We, \_\_\_\_\_

Hereby apply to enroll my/our child, \_\_\_\_\_

in the Khalsa Montessori Elementary School, Grade Level\*: \_\_\_\_\_ for the 23 / 24 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 enrollment if an opening becomes available.

\_\_\_\_\_  
Parent 1/Guardian Signature Date

\_\_\_\_\_  
Parent 2/Guardian Signature Date