

# Application/Wait List Form 2010/2011 School Year

Full name of Candidate: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Entering grade: \_\_\_\_\_ Current grade: \_\_\_\_\_

## Parent/Guardian Information:

	<b>Mother</b>	<b>Father</b>
Full names:		
Home address:		
Home phone:		
Business phone:		
Cell phone:		
Email:		

What is it about a Montessori Education that you most value?

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What are some of your child's strengths?

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What are some areas in which you would like to see your child develop?

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